# AMENDED IN ASSEMBLY JUNE 22, 2006 AMENDED IN SENATE APRIL 18, 2006 AMENDED IN SENATE APRIL 6, 2006

## **SENATE BILL**

No. 1472

### **Introduced by Senator Figueroa**

February 23, 2006

An act to amend Sections 101, 205, 1601.1, 1616.5, 1621, 1670.1, 1680, 1721, 1725, 1741, 1742, 1770, 1771, 4999.2, and 4999.7 of, to add Article 9 (commencing with Section 1900) to Chapter 4 of Division 2 of, and to repeal Sections 1760, 1760.5, 1761, 1762, 1763, 1764, 1765, 1766, 1768, 1769, 1772, 1774, and 1775 of, the Business and Professions Code, to amend Section 44876 of the Education Code, to amend Sections 1348.8 and 128160 of the Health and Safety Code, and to amend Section 14132 of the Welfare and Institutions Code, relating to healing arts, and making an appropriation therefor.

#### LEGISLATIVE COUNSEL'S DIGEST

SB 1472, as amended, Figueroa. Dentistry: dental hygienists.

(1) Existing law provides for the licensure and regulation of the practice of dentistry by the Dental Board of California, and authorizes the board to appoint an executive officer. Existing law also establishes the Committee on Dental Auxiliaries within the jurisdiction of the board. The provisions establishing the board, authorizing the board to appoint an executive officer, and establishing the committee are inoperative as of July 1, 2008, and are repealed as of January 1, 2009.

This bill would instead make these provisions inoperative on July 1, 2009, and would repeal them on January 1, 2010.

SB 1472 -2-

(2) Existing law, the Dental Practice Act, provides for the licensure and regulation of dental auxiliaries. Under that act, dental auxiliaries are defined as including, among others, dental assistants, registered dental hygienists, registered dental hygienists in extended functions, and registered dental hygienists in alternative practice. The act makes the Committee on Dental Auxiliaries responsible for licensing those who practice as a dental auxiliary and makes the Dental Board of California responsible for all disciplinary actions against a dental auxiliary and for approving all of their continuing education requirements. Under the act, fees collected in connection with the practice of a dental auxiliary are deposited into the State Dental Auxiliary Fund, in the Professions and Vocations Fund, which is continuously appropriated.

This bill would create the California Dental Hygiene Bureau in the Department of Consumer Affairs, and would create the Dental Hygiene Advisory Committee in the bureau, to assist the bureau as specified. The bill would establish specific criteria for licensure by the bureau of a registered dental hygienist, a registered dental hygienist in alternative practice, or a registered dental hygienist in extended practice. The bill would set forth the bureau's functions and duties, including issuing, reviewing, and revoking licenses, developing and administering examinations,—and determining fees and education programs and continuing education requirements for a registered dental hygienist, a registered dental hygienist in alternative practice, and a registered dental hygienist in extended functions, and adopting regulations.

This bill would create the State Dental Hygiene Fund in the Professions and Vocations Fund and would require that fees paid by licensees and certain fines be deposited into the fund. The bill would continuously appropriate certain moneys in the fund to the bureau to carry out the purposes of the bill. The bill would require a transfer of a specified amount into the fund from the State Dental Auxiliary Fund.

This bill would specify acts that would constitute unprofessional conduct, and would also specify acts that would constitute crimes. The bill would require the bureau to establish a diversion program for licensees whose competency may be impaired due to drug or alcohol abuse and to establish diversion evaluation committees, with specified duties in that regard.

\_3\_ SB 1472

Because a violation of certain provisions of the bill would be a crime, the bill would create a state-mandated local program.

(3) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: yes. Fiscal committee: yes. State-mandated local program: yes.

## The people of the State of California do enact as follows:

- 1 SECTION 1. Section 101 of the Business and Professions
- 2 Code is amended to read:
- 3 101. The department is comprised of:
- 4 (a) The Dental Board of California.
- 5 (b) The Medical Board of California.
- 6 (c) The State Board of Optometry.
- 7 (d) The California State Board of Pharmacy.
- 8 (e) The Veterinary Medical Board.
- 9 (f) The California Board of Accountancy.
- 10 (g) The California Architects Board.
- 11 (h) The Bureau of Barbering and Cosmetology.
- 12 (i) The Board for Professional Engineers and Land Surveyors.
- 13 (j) The Contractors' State License Board.
- 14 (k) The Bureau for Private Postsecondary and Vocational
- 15 Education.
- 16 (l) The Structural Pest Control Board.
- 17 (m) The Bureau of Home Furnishings and Thermal Insulation.
- 18 (n) The Board of Registered Nursing.
- 19 (o) The Board of Behavioral Sciences.
- 20 (p) The State Athletic Commission.
- 21 (g) The Cemetery and Funeral Bureau.
- (r) The State Board of Guide Dogs for the Blind.
- 23 (s) The Bureau of Security and Investigative Services.
- 24 (t) The Court Reporters Board of California.
- 25 (u) The Board of Vocational Nursing and Psychiatric
- 26 Technicians.
- (v) The Landscape Architects Technical Committee.

SB 1472 — 4—

- 1 (w) The Bureau of Electronic and Appliance Repair.
- 2 (x) The Division of Investigation.
- 3 (y) The Bureau of Automotive Repair.
- 4 (z) The State Board of Registration for Geologists and 5 Geophysicists.
  - (aa) The Respiratory Care Board of California.
- 7 (ab) The Acupuncture Board.

- 8 (ac) The Board of Psychology.
  - (ad) The California Board of Podiatric Medicine.
- 10 (ae) The Physical Therapy Board of California.
- 11 (af) The Arbitration Review Program.
- 12 (ag) The Committee on Dental Auxiliaries.
- 13 (ah) The Hearing Aid Dispensers Bureau.
- 14 (ai) The Physician Assistant Committee.
- 15 (aj) The Speech-Language Pathology and Audiology Board.
- 16 (ak) The California Board of Occupational Therapy.
- 17 (al) The Osteopathic Medical Board of California.
- 18 (am) The Bureau of Naturopathic Medicine.
- 19 (an) The California Dental Hygiene Bureau.
- 20 (ao) Any other boards, offices, or officers subject to its jurisdiction by law.
- SEC. 2. Section 205 of the Business and Professions Code is amended to read:
- 24 205. (a) There is in the State Treasury the Professions and
- Vocations Fund. The fund shall consist of the following special funds:
- 27 (1) Accountancy Fund.
- 28 (2) California Board of Architectural Examiners' Fund.
- 29 (3) Athletic Commission Fund.
- 30 (4) Barbering and Cosmetology Contingent Fund.
- 31 (5) Cemetery Fund.
- 32 (6) Contractors' License Fund.
- 33 (7) State Dentistry Fund.
- 34 (8) State Funeral Directors and Embalmers Fund.
- 35 (9) Guide Dogs for the Blind Fund.
- 36 (10) Bureau of Home Furnishings and Thermal Insulation
- 37 Fund.
- 38 (11) California Board of Architectural Examiners-Landscape
- 39 Architects Fund.
- 40 (12) Contingent Fund of the Medical Board of California.

\_5\_ SB 1472

- 1 (13) Optometry Fund.
- 2 (14) Pharmacy Board Contingent Fund.
- 3 (15) Physical Therapy Fund.
- 4 (16) Private Investigator Fund.
- 5 (17) Professional Engineers' and Land Surveyors' Fund.
- 6 (18) Consumer Affairs Fund.
- 7 (19) Behavioral Sciences Fund.
- 8 (20) Licensed Midwifery Fund.
- 9 (21) Court Reporters' Fund.
- 10 (22) Structural Pest Control Fund.
- 11 (23) Veterinary Medical Board Contingent Fund.
- 12 (24) Vocational Nurses Account of the Vocational Nursing
- 13 and Psychiatric Technicians Fund.
- 14 (25) State Dental Auxiliary Fund.
- 15 (26) Electronic and Appliance Repair Fund.
- 16 (27) Geology and Geophysics Fund.
- 17 (28) Dispensing Opticians Fund.
- 18 (29) Acupuncture Fund.
- 19 (30) Hearing Aid Dispensers Fund.
- 20 (31) Physician Assistant Fund.
- 21 (32) Board of Podiatric Medicine Fund.
- 22 (33) Psychology Fund.
- 23 (34) Respiratory Care Fund.
- 24 (35) Speech-Language Pathology and Audiology Fund.
- 25 (36) Board of Registered Nursing Fund.
- 26 (37) Psychiatric Technician Examiners Account of the
- 27 Vocational Nursing and Psychiatric Technicians Fund.
- 28 (38) Animal Health Technician Examining Committee Fund.
- 29 (39) Structural Pest Control Education and Enforcement Fund.
  - (40) Structural Pest Control Research Fund.
- 31 (41) State Dental Hygiene Fund.
- 32 (b) For accounting and recordkeeping purposes, the
- 33 Professions and Vocations Fund shall be deemed to be a single
- 34 special fund, and each of the several special funds therein shall
- 35 constitute and be deemed to be a separate account in the
- 36 Professions and Vocations Fund. Each account or fund shall be
- 37 available for expenditure only for the purposes as are now or may
- 38 hereafter be provided by law.
- 39 SEC. 3. Section 1601.1 of the Business and Professions Code
- 40 is amended to read:

SB 1472 -6-

1601.1. (a) There shall be in the Department of Consumer Affairs the Dental Board of California in which the administration of this chapter is vested. The board shall consist of eight practicing dentists, one registered dental hygienist, one registered dental assistant, and four public members. Of the eight practicing dentists, one shall be a member of a faculty of any California dental college and one shall be a dentist practicing in a nonprofit community clinic. The appointing powers, described in Section 1603, may appoint to the board a person who was a member of the prior board. The board shall be organized into standing committees dealing with examinations, enforcement, and other subjects as the board deems appropriate. 

- (b) For purposes of this chapter, any reference in this chapter to the Board of Dental Examiners shall be deemed to refer to the Dental Board of California.
- (c) The board shall have all authority previously vested in the existing board under this chapter. The board may enforce all disciplinary actions undertaken by the previous board.
- (d) This section shall become inoperative on July 1, 2009, and, as of January 1, 2010, is repealed, unless a later enacted statute that is enacted before January 1, 2010, deletes or extends the dates on which it becomes inoperative and is repealed. The repeal of this section renders the board subject to the review required by Division 1.2 (commencing with Section 473).
- SEC. 4. Section 1616.5 of the Business and Professions Code is amended to read:
- 1616.5. (a) The board, by and with the approval of the director, may appoint a person exempt from civil service who shall be designated as an executive officer and who shall exercise the powers and perform the duties delegated by the board and vested in him or her by this chapter.
- (b) This section shall become inoperative on July 1, 2009, and, as of January 1, 2010, is repealed, unless a later enacted statute that is enacted before January 1, 2010, deletes or extends the dates on which it becomes inoperative and is repealed.
- SEC. 5. Section 1621 of the Business and Professions Code is amended to read:
- 38 1621. The board shall utilize in the administration of its 39 licensure examinations only examiners whom it has appointed 40 and who meet the following criteria:

\_7\_ SB 1472

(a) Possession of a valid license to practice dentistry in this state or possession of a valid license in one of the following categories: registered dental assistant, registered dental assistant in extended functions, registered dental hygienist, registered dental hygienist in extended functions, or registered dental hygienist in alternative practice.

- (b) Practice as a licensed dentist or in a licensure category described in subdivision (a) for at least five years preceding his or her appointment.
- (c) Hold no position as an officer or faculty member at any college, school, or institution that provides dental instruction in the same licensure category as that held by the examiner.
- SEC. 6. Section 1670.1 of the Business and Professions Code is amended to read:
- 1670.1. (a) Any licentiate under this chapter may have his or her license revoked or suspended or be reprimanded or be placed on probation by the board for conviction of a crime substantially related to the qualifications, functions, or duties of a dentist, dental auxiliary, or dental hygienist, in which case the record of conviction or a certified copy thereof, certified by the clerk of the court or by the judge in whose court the conviction is had, shall be conclusive evidence.
- (b) The board shall undertake proceedings under this section upon the receipt of a certified copy of the record of conviction. A plea or verdict of guilty or a conviction following a plea of nolo contendere made to a charge of a felony or of any misdemeanor substantially related to the qualifications, functions, or duties of a dentist, dental auxiliary, or dental hygienist is deemed to be a conviction within the meaning of this section. The board may order the license suspended or revoked, or may decline to issue a license, when the time for appeal has elapsed, or the judgment of conviction has been affirmed on appeal or when an order granting probation is made suspending the imposition of sentence, irrespective of a subsequent order under any provision of the Penal Code, including, but not limited to, Section 1203.4 of the Penal Code, allowing the person to withdraw his or her plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, information, or indictment.

SB 1472 — 8—

SEC. 7. Section 1680 of the Business and Professions Code is amended to read:

- 1680. Unprofessional conduct by a person licensed under this chapter is defined as, but is not limited to, any one of the following:
  - (a) The obtaining of any fee by fraud or misrepresentation.
- (b) The employment directly or indirectly of any student or suspended or unlicensed dentist to practice dentistry as defined in this chapter.
- (c) The aiding or abetting of any unlicensed person to practice dentistry.
- (d) The aiding or abetting of a licensed person to practice dentistry unlawfully.
- (e) The committing of any act or acts of sexual abuse, misconduct, or relations with a patient that are substantially related to the practice of dentistry.
- (f) The use of any false, assumed, or fictitious name, either as an individual, firm, corporation, or otherwise, or any name other than the name under which he or she is licensed to practice, in advertising or in any other manner indicating that he or she is practicing or will practice dentistry, except that name as is specified in a valid permit issued pursuant to Section 1701.5.
- (g) The practice of accepting or receiving any commission or the rebating in any form or manner of fees for professional services, radiograms, prescriptions, or other services or articles supplied to patients.
- (h) The making use by the licensee or any agent of the licensee of any advertising statements of a character tending to deceive or mislead the public.
- (i) The advertising of either professional superiority or the advertising of performance of professional services in a superior manner. This subdivision shall not prohibit advertising permitted by subdivision (h) of Section 651.
  - (i) The employing or the making use of solicitors.
  - (k) The advertising in violation of Section 651.
- (*l*) The advertising to guarantee any dental service, or to perform any dental operation painlessly. This subdivision shall not prohibit advertising permitted by Section 651.
- 39 (m) The violation of any of the provisions of law regulating 40 the procurement, dispensing, or administration of dangerous

-9- SB 1472

drugs, as defined in Chapter 9 (commencing with Section 4000), or controlled substances, as defined in Division 10 (commencing with Section 11000) of the Health and Safety Code.

(n) The violation of any of the provisions of this division.

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- (o) The permitting of any person to operate dental radiographic equipment who has not met the requirements of Section 1656.
- (p) The clearly excessive prescribing or administering of drugs or treatment, or the clearly excessive use of diagnostic procedures, or the clearly excessive use of diagnostic or treatment facilities, as determined by the customary practice and standards of the dental profession.

Any person who violates this subdivision is guilty of a misdemeanor and shall be punished by a fine of not less than one hundred dollars (\$100) or more than six hundred dollars (\$600), or by imprisonment for a term of not less than 60 days or more than 180 days, or by both a fine and imprisonment.

- (q) The use of threats or harassment against any patient or licensee for providing evidence in any possible or actual disciplinary action, or other legal action; or the discharge of an employee primarily based on the employee's attempt to comply with the provisions of this chapter or to aid in the compliance.
- (r) Suspension or revocation of a license issued, or discipline imposed, by another state or territory on grounds which would be the basis of discipline in this state.
  - (s) The alteration of a patient's record with intent to deceive.
- (t) Unsanitary or unsafe office conditions, as determined by the customary practice and standards of the dental profession.
- (u) The abandonment of the patient by the licensee, without written notice to the patient that treatment is to be discontinued and before the patient has ample opportunity to secure the services of another dentist or dental hygienist and provided the health of the patient is not jeopardized.
- (v) The willful misrepresentation of facts relating to a disciplinary action to the patients of a disciplined licensee.
- (w) Use of fraud in the procurement of any license issued pursuant to this chapter.
- (x) Any action or conduct that would have warranted the denial of the license.

SB 1472 -10-

(y) The aiding or abetting of a licensed dentist, dental auxiliary, or dental hygienist to practice dentistry in a negligent or incompetent manner.

- (z) The failure to report to the board in writing within seven days any of the following: (1) the death of his or her patient during the performance of any dental or dental hygiene procedure; (2) the discovery of the death of a patient whose death is related to a dental or dental hygiene procedure performed by him or her; or (3) except for a scheduled hospitalization, the removal to a hospital or emergency center for medical treatment for a period exceeding 24 hours of any patient to whom oral conscious sedation, conscious sedation, or general anesthesia was administered, or any patient as a result of dental or dental hygiene treatment. With the exception of patients to whom oral conscious sedation, conscious sedation, or general anesthesia was administered, removal to a hospital or emergency center that is the normal or expected treatment for the underlying dental condition is not required to be reported. Upon receipt of a report pursuant to this subdivision the board may conduct an inspection of the dental office if the board finds that it is necessary.
- (aa) Participating in or operating any group advertising and referral services that are in violation of Section 650.2.
- (bb) The failure to use a fail-safe machine with an appropriate exhaust system in the administration of nitrous oxide. The board shall, by regulation, define what constitutes a fail-safe machine.
- (cc) Engaging in the practice of dentistry or dental hygiene with an expired license.
- (dd) Except for good cause, the knowing failure to protect patients by failing to follow infection control guidelines of the board, thereby risking transmission of blood-borne infectious diseases from dentist, dental auxiliary, or dental hygienist to patient, from patient to patient, and from patient to dentist, dental auxiliary, or dental hygienist. In administering this subdivision, the board shall consider referencing the standards, regulations, and guidelines of the State Department of Health Services developed pursuant to Section 1250.11 of the Health and Safety Code and the standards, guidelines, and regulations pursuant to the California Occupational Safety and Health Act of 1973 (Part 1 (commencing with Section 6300) of Division 5 of the Labor Code) for preventing the transmission of HIV, hepatitis B, and

—11— SB 1472

other blood-borne pathogens in health care settings. As necessary, the board shall consult with the Medical Board of California, the California Board of Podiatric Medicine, the Board of Registered Nursing, and the Board of Vocational Nursing and Psychiatric Technicians, to encourage appropriate consistency in the implementation of this subdivision.

The board shall seek to ensure that licensees and others regulated by the board are informed of the responsibility of licensees and others to follow infection control guidelines, and of the most recent scientifically recognized safeguards for minimizing the risk of transmission of blood-borne infectious diseases.

- (ee) The utilization by a licensed dentist of any person to perform the functions of a registered dental assistant, registered dental assistant in extended functions, registered dental hygienist, or registered dental hygienist in extended functions who, at the time of initial employment, does not possess a current, valid license to perform those functions.
- (ff) The prescribing, dispensing, or furnishing of dangerous drugs or devices, as defined in Section 4022, in violation of Section 2242.1.
- SEC. 8. Section 1721 of the Business and Professions Code is amended to read:
- 1721. Except as provided in Sections 1721.5 and 1945, all funds received by the State Treasurer under the authority of this chapter shall be placed in the State Dentistry Fund. Except as provided in Sections 1721.5 and 1945, all disbursements by the board made in the transaction of its business and in the enforcement of this chapter shall be paid out of the fund upon claims against the state.
- SEC. 9. Section 1725 of the Business and Professions Code is amended to read:
- 1725. The amount of the fees prescribed by this chapter that relate to the licensing of dental auxiliaries shall be established by board resolution and subject to the following limitations:
- (a) The application fee for an original license shall not exceed twenty dollars (\$20).
- (b) The fee for examination for licensure as a registered dental assistant shall not exceed fifty dollars (\$50) for the written examination and shall not exceed sixty dollars (\$60) for the

SB 1472 — 12 —

practical examination. On and after January 1, 2008, the application fee and the fee for issuance of a license as a registered orthodontic assistant, registered surgery assistant, registered restorative assistant, or registered dental assistant shall not exceed fifty dollars (\$50).

- (c) The fee for examination for licensure as a registered dental assistant in extended functions or a registered restorative assistant in extended functions shall not exceed two hundred fifty dollars (\$250).
- (d) The biennial renewal fee for a dental auxiliary whose license expires on or after January 1, 1991, shall not exceed sixty dollars (\$60). On or after January 1, 1992, the board may set the renewal fee in an amount not to exceed eighty dollars (\$80).
- (e) The delinquency fee shall not exceed twenty-five dollars (\$25) or one-half of the renewal fee, whichever is greater. Any delinquent license may be restored only upon payment of all fees, including the delinquency fee.
- (f) The fee for issuance of a duplicate registration, license, or certificate to replace one that is lost or destroyed, or in the event of a name change, shall not exceed twenty-five dollars (\$25).
- (g) The fee for each curriculum review and site evaluation for educational programs for registered dental assistants that are not accredited by a board-approved agency, the Council for Private Postsecondary and Vocational Education, or the Chancellor's office of the California Community Colleges shall not exceed one thousand four hundred dollars (\$1,400).
- (h) The fee for each review of radiation safety courses or specialty registration courses that are not accredited by a board-approved agency, the Council for Private Postsecondary and Vocational Education, or the Chancellor's office of the California Community Colleges shall not exceed three hundred dollars (\$300).
- (i) No fees or charges other than those listed in subdivisions (a) through (g) above shall be levied by the board in connection with the licensure of dental auxiliaries, registered dental assistants educational program site evaluations and radiation safety course evaluations pursuant to this chapter.
- (j) Fees fixed by the board pursuant to this section shall not be subject to the approval of the Office of Administrative Law.

-13-SB 1472

1 (k) Fees collected pursuant to this section shall be deposited in 2 the State Dental Auxiliary Fund.

- 3 SEC. 10. Section 1741 of the Business and Professions Code is amended to read:
  - 1741. As used in this article:

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- (a) "Board" means the Dental Board of California.
- (b) "Committee" means the Committee on Dental Auxiliaries.
- (c) "Direct supervision" means supervision of dental procedures based on instructions given by a licensed dentist, who must be physically present in the treatment facility during the performance of those procedures.
- (d) "General supervision" means supervision of dental procedures based on instructions given by a licensed dentist but not requiring the physical presence of the supervising dentist during the performance of those procedures.
- (e) "Dental auxiliary" means a person who may perform dental assisting authorized by this article.
- SEC. 11. Section 1742 of the Business and Professions Code is amended to read:
- 1742. (a) There is within the jurisdiction of the board a Committee on Dental Auxiliaries.
- (b) The Committee on Dental Auxiliaries shall have the following areas of responsibility and duties:
- (1) The committee shall have the following duties and authority related to education programs and curriculum:
- (A) Shall evaluate all dental auxiliary programs applying for board approval in accordance with board rules governing the programs.
- (B) May appoint board members to any evaluation committee. Board members so appointed shall not make a final decision on the issue of program or course approval.
- (C) Shall report and make recommendations to the board as to whether a program or course qualifies for approval. The board retains the final authority to grant or deny approval to a program or course.
- (D) Shall review and document any alleged deficiencies that might warrant board action to withdraw or revoke approval of a program or course, at the request of the board.

SB 1472 — 14—

(E) May review and document any alleged deficiencies that might warrant board action to withdraw or revoke approval of a program or course, at its own initiation.

- (2) The committee shall have the following duties and authority related to applications:
- (A) Shall review and evaluate all applications for licensure in the various dental auxiliary categories to ascertain whether a candidate meets the appropriate licensing requirements specified by statute and board regulations.
- (B) Shall maintain application records, cashier application fees, and perform any other ministerial tasks as are incidental to the application process.
- (C) May delegate any or all of the functions in this paragraph to its staff.
- (D) Shall issue auxiliary licenses in all cases, except where there is a question as to a licensing requirement. The board retains final authority to interpret any licensing requirement. If a question arises in the area of interpreting any licensing requirement, it shall be presented by the committee to the board for resolution.
- (3) The committee shall have the following duties and authority regarding examinations:
- (A) Shall advise the board as to the type of license examination it deems appropriate for the various dental auxiliary license categories.
- (B) Shall, at the direction of the board, develop or cause to be developed, administer, or both, examinations in accordance with the board's instructions and periodically report to the board on the progress of those examinations. The following shall apply to the examination procedure:
- (i) The examination shall be submitted to the board for its approval prior to its initial administration.
- (ii) Once an examination has been approved by the board, no further approval is required unless a major modification is made to the examination.
- (iii) The committee shall report to the board on the results of each examination and shall, where appropriate, recommend pass points.
- 39 (iv) The board shall set pass points for all dental auxiliary 40 licensing examinations.

\_\_15\_\_ SB 1472

(C) May appoint board members to any examination committee established pursuant to subparagraph (B).

- (4) The committee shall periodically report and make recommendations to the board concerning the level of fees for dental auxiliaries and the need for any legislative fee increase. However, the board retains final authority to set all fees.
- (5) The committee shall be responsible for all aspects of the license renewal process, which shall be accomplished in accordance with this chapter and board regulations. The committee may delegate any or all of its functions under this paragraph to its staff.
- (6) The committee shall have no authority with respect to the approval of continuing education providers; the board retains all of this authority.
- (7) The committee shall advise the board as to appropriate standards of conduct for auxiliaries, the proper ordering of enforcement priorities, and any other enforcement-related matters that the board may, in the future, delegate to the committee. The board shall retain all authority with respect to the enforcement actions, including, but not limited to, complaint resolution, investigation, and disciplinary action against auxiliaries.
- (8) The committee shall have the following duties regarding regulations:
- (A) To review and evaluate all suggestions or requests for regulatory changes related to dental auxiliaries.
- (B) To report and make recommendations to the board, after consultation with departmental legal counsel and the board's executive officer.
- (C) To include in any report regarding a proposed regulatory change, at a minimum, the specific language of the proposed changes and the reasons for and facts supporting the need for the change. The board has the final rulemaking authority.
- (c) This section shall become inoperative on July 1, 2009, and, as of January 1, 2010, is repealed, unless a later enacted statute which becomes effective on or before January 1, 2010, deletes or extends the dates on which it becomes inoperative and is repealed. The repeal of this section renders the committee subject to the review required by Division 1.2 (commencing with Section 473).

SB 1472 — 16—

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- SEC. 12. Section 1760 of the Business and Professions Code is repealed.
- 3 SEC. 13. Section 1760.5 of the Business and Professions 4 Code is repealed.
- 5 SEC. 14. Section 1761 of the Business and Professions Code 6 is repealed.
- 7 SEC. 15. Section 1762 of the Business and Professions Code 8 is repealed.
- 9 SEC. 16. Section 1763 of the Business and Professions Code 10 is repealed.
- SEC. 17. Section 1764 of the Business and Professions Code is repealed.
- SEC. 18. Section 1765 of the Business and Professions Code is repealed.
- SEC. 19. Section 1766 of the Business and Professions Code is repealed.
- 17 SEC. 20. Section 1768 of the Business and Professions Code 18 is repealed.
- 19 SEC. 21. Section 1769 of the Business and Professions Code 20 is repealed.
- SEC. 22. Section 1770 of the Business and Professions Code, as amended by Section 22 of Chapter 621 of the Statutes of 2005, is amended to read:
  - 1770. (a) A licensed dentist may simultaneously utilize in his or her practice no more than two dental auxiliaries in extended functions or dental hygienists in extended functions licensed pursuant to Sections 1756 and 1918.
  - (b) This section shall become inoperative on December 31, 2007, and, as of January 1, 2008, is repealed, unless a later enacted statute, that is enacted before January 1, 2008, deletes or extends the dates on which it becomes inoperative and is repealed.
  - SEC. 23. Section 1770 of the Business and Professions Code, as amended by Section 23 of Chapter 621 of the Statutes of 2005, is amended to read:
  - 1770. (a) A licensed dentist may simultaneously utilize in his or her practice no more than three dental auxiliaries in extended functions or dental hygienists in extended functions licensed pursuant to Sections 1753 and 1918.
    - (b) This section shall become operative on January 1, 2008.

\_\_17\_\_ SB 1472

SEC. 24. Section 1771 of the Business and Professions Code is amended to read:

1771. Any person, other than a person who has been issued a license by the board, who holds himself or herself out as a registered dental assistant or registered dental assistant in extended functions, or uses any other term indicating or implying he or she is licensed by the board in the aforementioned categories, is guilty of a misdemeanor.

SEC. 25. Section 1772 of the Business and Professions Code is repealed.

SEC. 26. Section 1774 of the Business and Professions Code is repealed.

SEC. 27. Section 1775 of the Business and Professions Code is repealed.

SEC. 28. Article 9 (commencing with Section 1900) is added to Chapter 4 of Division 2 of the Business and Professions Code, to read:

## Article 9. Dental Hygienists

1900. It is the intent of the Legislature by enactment of this article to permit the full utilization of dental hygienists in order to meet the dental care needs of all of the state's citizens.

1901. There is hereby created in the Department of Consumer Affairs a California Dental Hygiene Bureau in which the administration of this article is vested.

1902. For purposes of this article, the following definitions apply:

- (a) "Bureau" means the California Dental Hygiene Bureau.
- (b) "Committee" means the Dental Hygiene Advisory Committee.
  - (c) "Dental board" means the Dental Board of California.

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(d) "Direct supervision" means the supervision of dental procedures based on instructions given by a licensed dentist who is required to be physically present in the treatment facility during the performance of those procedures.

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(e) "General supervision" means the supervision of dental procedures based on instructions given by a licensed dentist who

**—18** — **SB 1472** 

is not required to be physically present in the treatment facility 2 during the performance of those procedures. 3

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- (f) "Oral prophylaxis" means preventive and therapeutic dental procedures that include bacterial debridement with complete removal, supra and subgingivally, of calculus, soft deposits, plaque, and stains, and the smoothing of tooth surfaces. The objective of this treatment is to create an environment in which the patient can maintain healthy hard and soft tissues.
- 1903. (a) (1) The bureau—There is in the department the California Dental Hygiene Bureau, under the supervision and control of the director. The director may appoint a chief at a salary to be fixed and determined by the director, with the approval of the Director of Finance. The duty of enforcing and administering this chapter is vested in the chief, and he or she is responsible to the director therefor. The chief shall serve at the pleasure of the director. Every power granted or duty imposed upon the director under this chapter may be exercised or performed in the name of the director by a deputy director or by the chief, subject to such conditions and limitations as the director may prescribe.
- (b) (1) There is within the bureau a Dental Hygiene Advisory Committee. The committee shall consist of nine members appointed by the Governor. Four shall be public members, one member shall be a-licensed public health dentist who holds a current license in California, and four members shall be registered dental hygienists who hold current licenses in California. Of the registered dental hygienists members, one shall be licensed either in alternative practice or in extended functions, one shall be a dental hygiene educator, and two shall be registered dental hygienists holding a current, valid license to practice dental hygiene. No. No public member shall have been licensed under this chapter within five years of the date of his or her appointment to the bureau or have any current financial interest in a dental-related business.
- (2) For purposes of this subdivision, a public health dentist is a dentist whose primary employer or place of employment is in any of the following:
- (A) A primary care clinic licensed under subdivision (a) of Section 1204 of the Health and Safety Code.

**— 19 —** SB 1472

(B) A primary care clinic exempt from licensure pursuant to subdivision (c) of Section 1206 of the Health and Safety Code.

- (C) A clinic owned or operated by a public hospital or health system.
- (D) A clinic owned and operated by a hospital that maintains the primary contract with a county government to fill the county's role under Section 17000 of the Welfare and Institutions Code.

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- (c) Except for the initial term, members of the bureau committee shall be appointed for a term of four years. Of the initial appointments, the terms shall expire as follows:
- (1) The term of the licensed dentist member, one of the public members, and one of the registered dental hygienists shall expire on December 31, 2007.
- (2) The term of a second public member, the other registered dental hygienist, and the dental hygienist in alternative practice or in extended functions shall expire on December 31, 2008.
- (3) The term of the remaining members shall expire on December 31, 2009.
  - (c) The bureau
- (d) The committee shall annually elect one of its members as president of the bureau.

(e) No person shall serve as a member of the bureau committee for more than two consecutive terms.

28 (f) A vacancy in the bureau committee shall be filled by 29 appointment to the unexpired term.

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(g) Each member of the bureau committee shall receive a per 32 diem and expenses as provided in Section 103.

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- (h) The Governor shall have the power to remove any member from the bureau committee for neglect of a duty required by law or for incompetence or for unprofessional or dishonorable conduct.
- 38 1904. (a) The bureau committee shall meet at least four two 39 times each calendar year and shall conduct additional meetings in 40 appropriate locations that are necessary to transact its business.

SB 1472 — 20 —

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(b) Special meetings may be held by the bureau at times and locations designated by it.

- (e) The bureau shall provide a minimum of two weeks' notice of its meetings to those persons and organizations who have expressed an interest in receiving this notification.
  - (b) The committee shall do all of the following:
- (1) Examine the functions and policies of the bureau and make recommendations with respect to policies, practices, and regulations as may be deemed important and necessary by the director or the chief to promote the interests of consumers or that otherwise promote the welfare of the public.
- (2) Consider and make appropriate recommendations to the bureau in all matters relating to dental hygiene in this state.
- (3) Provide assistance as may be requested by the bureau in the exercise of its powers or duties.
- (c) The chief shall meet and consult with the committee regarding general policy issues related to dental hygiene.
  - 1905. (a) The bureau shall perform the following functions:
- (1) Evaluating—Evaluate all registered dental hygienist, registered dental hygienist in alternative practice, and registered dental hygienist in extended functions educational programs that apply for approval and granting or denying approval of those applications in accordance with regulations adopted by the bureau. Any such educational programs approved by the board on or before December 31, 2006, shall be deemed approved by the bureau.
- (2) Withdrawing or revoking Withdraw or revoke its prior approval of a registered dental hygienist, registered dental hygienist in alternative practice, or registered dental hygienist in extended functions educational program in accordance with regulations adopted by the bureau.
- (3) Reviewing and evaluating Review and evaluate all registered dental hygienist, registered dental hygienist in alternative practice, or registered dental hygienist in extended functions applications for licensure to ascertain whether the applicant meets the appropriate licensing requirements specified by statute and bureau regulations, maintaining maintain application records, eashiering cashier application fees, issuing and renewing issue and renew licenses, and performing perform

**SB 1472** 

any other tasks that are incidental to the application and licensure processes.

- (4) Determing—Determine the appropriate type of license examination consistent with the provisions of this article, and developing or causing develop or cause to be developed and administering administer examinations in accordance with regulations adopted by the bureau.
- (5) Determine Determine the amount of fees assessed under this article.
- (6) Determining and enforcing Determine and enforce the continuing education requirements specified in this article.
- (7) Advising the dental board as to the appropriate standards of conduct for a registered dental hygienist, a registered dental hygienist in alternative practice, and a registered dental hygienist in extended functions, the proper ordering of enforcement priorities, and any other enforcement-related matters.

#### (8) Adopting

- (7) Deny, suspend, or revoke a license under this article, or otherwise enforce the provisions of this article. Any such proceedings shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, and the bureau shall have all of the powers granted therein.
- (8) Adopt rules and regulations to implement the provisions of this article, including the required amount of supervision by a licensed dentist of a registered dental hygienist, registered dental hygienist in alternative practice, and registered dental hygienist in extended functions.
  - (9) Hiring an executive officer.
- (b) The bureau may employ employees and examiners that it deems necessary to carry out its functions and responsibilities under this article.
- 1905.1. Until January 1, 2008, the bureau may contract with the dental board, or with the Committee on Dental Auxiliaries, to carry out any of the provisions of this article. On and after January 1, 2008, the bureau may contract with the dental board to perform investigations of applicants and licensees under this article.
- 39 1906. (a) The bureau shall adopt regulations to implement 40 the requirements of this article.

SB 1472 — 22 —

(b) All regulations adopted by the bureau shall comply with the provisions of Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code.

<del>(b)</del>

(c) No regulation adopted by the bureau shall impose a requirement or a prohibition directly upon a licensed dentist or on the administration of a dental office, unless specifically authorized by this article.

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- (d) Unless contrary to the provisions of this article, regulations adopted by the dental board shall continue to apply to registered dental hygienists, registered dental hygienists in alternative practice, and registered dental hygienists in extended functions until other regulations are adopted by the bureau. All references in those regulations to "board" shall mean the California Dental Hygiene Bureau that shall solely enforce the regulations with respect to registered dental hygienists, registered dental hygienists in alternative practice, and registered dental hygienists in extended functions.
- 1907. The following functions may be performed by a registered dental hygienist in addition to those authorized pursuant to Sections 1908 to 1914, inclusive:
- (a) All functions that may be performed by a dental assistant or a registered dental assistant..
- (b) All persons holding a license as a registered dental hygienist on January 1, 2003, or issued a license on or before December 31, 2005 hygienist before January 1, 2006, are authorized to perform the duties of a registered dental assistant specified in Section 1754 this chapter. All persons issued a license as a registered dental hygienist on and or after January 1, 2006, shall qualify for and receive a registered dental assistant license prior to performance of the duties specified in Section 1754. this chapter.
- 1908. (a) The practice of dental hygiene includes dental hygiene assessment, development, planning, and implementation of a dental hygiene care plan. It also includes oral health education, counseling, and health screenings.
- (b) The practice of dental hygiene does not include any of the following procedures:
  - (1) Diagnosis and comprehensive treatment planning.

\_\_ 23 \_\_ SB 1472

(2) Placing, condensing, carving, or removal of permanent restorations.

- (3) Surgery or cutting on hard and soft tissue including, but not limited to, the removal of teeth and the cutting and suturing of soft tissue.
  - (4) Prescribing medication.

- (5) Administering local or general anesthesia or oral or parenteral conscious sedation, except for the administration of nitrous oxide and oxygen, whether administered alone or in combination with each other, or local anesthesia pursuant to Section 1909.
- 1909. A *registered* dental hygienist is authorized to perform the following procedures under direct supervision, after submitting to the bureau evidence of satisfactory completion of a bureau-approved course of instruction in the procedures:
  - (a) Soft-tissue curettage.
  - (b) Administration of local anesthesia.
- (c) Administration of nitrous oxide and oxygen, whether administered alone or in combination with each other.
- 1910. A *registered* dental hygienist is authorized to perform the following procedures under general supervision:
- (a) Preventive and therapeutic interventions, including oral prophylaxis, scaling, and root planing.
- (b) Application of topical, therapeutic, and subgingival agents used for the control of caries and periodontal disease.
- (c) The taking of impressions for bleaching trays and application and activation of agents with nonlaser, light-curing devices.
- (d) The taking of impressions for bleaching trays and placements of in-office, tooth-whitening devices.
- 1911. (a) A *registered* dental hygienist may provide, without supervision, educational services, oral health training programs, and oral health screenings.
- (b) A *registered* dental hygienist shall refer any screened patients with possible oral abnormalities to a dentist for a comprehensive examination, diagnosis, and treatment plan.
- (c) In any public health program created by federal, state, or local law or administered by a federal, state, county, or local governmental entity, a *registered* dental hygienist may provide, without supervision, dental hygiene preventive services in

SB 1472 — 24 —

addition to oral screenings, including, but not limited to, the application of fluorides and pit and fissure sealants.

- 1912. Any procedure performed or service provided by a *registered* dental hygienist that does not specifically require direct supervision shall require general supervision, so long as it does not give rise to a situation in the dentist's office requiring immediate services for alleviation of severe pain, or immediate diagnosis and treatment of unforeseeable dental conditions that, if not immediately diagnosed and treated, would lead to serious disability or death.
- 1913. Unless otherwise specified in this chapter, a *registered* dental hygienist may perform any procedure or provide any service within the scope of his or her practice in any setting, so long as the procedure is performed or the service is provided under the appropriate level of supervision required by this article.
- 1914. A *registered* dental hygienist may use any material or device approved for use in the performance of a service or procedure within his or her scope of practice under the appropriate level of supervision, if the dental hygienist he or she has the appropriate education and training required to use the material or device.
- 1915. No person other than a—licensed registered dental hygienist or a licensed dentist may engage in the practice of dental hygiene or perform dental hygiene procedures on patients, including, but not limited to, supragingival and subgingival scaling, dental hygiene assessment, and treatment planning, except for the following persons:
- (a) A student enrolled in a dental or a dental hygiene school who is performing procedures as part of the regular curriculum of that program under the supervision of the faculty of that program.
- (b) A dental assistant acting in accordance with the rules of the board in performing the following procedures:
  - (1) Applying nonaerosol and noncaustic topical agents.
- (2) Applying topical fluoride.
  - (3) Taking impression for bleaching trays.
- 36 (c) A registered dental assistant acting in accordance with the 37 rules of the board in performing the following procedures:
- 38 (1) Polishing the coronal surfaces of teeth.
- 39 (2) Applying bleaching agents.

\_\_25\_\_ SB 1472

1 (3) Activating bleaching agents with a nonlaser light-curing device.

(4) Applying pit and fissure sealant.

- (d) A registered dental assistant in extended functions acting in accordance with the rules of the board in applying pit and fissure sealants.
- (e) A registered dental hygienist licensed in another jurisdiction performing a clinical demonstration for educational purposes.
- 1916. (a) An applicant for licensure under this article shall furnish fingerprint images for submission to state and federal criminal justice agencies, including, but not limited to, the Federal Bureau of Investigation, in order to establish the identity of the applicant and for the other purposes described in this section.
- (b) The bureau shall submit the fingerprint images to the Department of Justice for the purposes of obtaining criminal offender record information regarding state and federal level convictions and arrests, including arrests which the Department of Justice establishes that the person is free on bail or on his or her recognizance pending trial or appeal.
- (c) When received, the Department of Justice shall forward to the Federal Bureau of Investigation requests for federal summary criminal history information received pursuant to this section. The Department of Justice shall review the information returned from the Federal Bureau of Investigation and compile and disseminate response to the bureau.
- (d) The Department of Justice shall provide a response to the bureau pursuant to subdivision (p) of Section 11105 of the Penal Code.
- (e) The bureau shall request from the Department of Justice subsequent arrest notification service, as provided pursuant to Section 11105.2 of the Penal Code.
- (f) The information obtained as a result of the fingerprinting shall be used in accordance with Section 11105 of the Penal Code, and to determine whether the applicant is subject to denial of licensure pursuant to Division 1.5 (commencing with Section 475), or Section 1628.5.
- 39 (g) The Department of Justice shall charge a fee sufficient to 40 cover the cost of processing the request described in this section.

**SB 1472** -26-

1 <del>1916. (a)</del>

2 1917. The bureau shall license as a registered dental hygienist a person who satisfies all of the following requirements:

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(a) Completion of an educational program for registered dental hygienists, approved by the bureau, accredited by the Commission on Dental Accreditation, and conducted by a degree-granting, postsecondary institution.

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- (b) Satisfactory performance on an examination required by the bureau.
- 12 (3) a clinical examination and an examination in California law and ethics as prescribed by the bureau.
  - (c) Satisfactory completion of a national written dental hygiene examination approved by the bureau.

<del>(b)</del>

- 1917.1. (a) The bureau may grant a license as a registered dental hygienist to an applicant who has not taken-an a clinical examination before the bureau, if the applicant submits all of the following to the bureau:
- (1) A completed application form and all fees required by the bureau.
- (2) Proof of a current license as a registered dental hygienist issued by another state that is not revoked, suspended, or otherwise restricted.
- (3) Proof that the applicant has been in clinical practice as a registered dental hygienist or has been a full-time faculty member in an accredited dental hygiene education program for a minimum of 750 hours per year for at least five years preceding the date of his or her application under this section. The clinical practice requirement shall be deemed met if the applicant provides proof of at least three years of clinical practice and commits to completing the remaining two years of clinical practice by filing with the bureau a copy of a pending contract to practice dental hygiene in any of the following facilities:
- (A) A primary care clinic licensed under subdivision (a) of Section 1204 of the Health and Safety Code.
- (B) A primary care clinic exempt from licensure pursuant to 38 39 subdivision (c) of Section 1206 of the Health and Safety Code.

**— 27 —** SB 1472

(C) A clinic owned or operated by a public hospital or health 2 system.

- (D) A clinic owned and operated by a hospital that maintains the primary contract with a county government to fill the county's role under Section 17000 of the Welfare and Institutions Code.
- (4) Satisfactory performance on the California Law and Ethics a California law and ethics examination and any examination that may be required by the bureau.
- (5) Proof that the applicant has not been subject to disciplinary action by any state in which he or she is or has been previously licensed as a registered dental hygienist or dentist. If the applicant has been subject to disciplinary action, the bureau shall review that action to determine if it warrants refusal to issue a license to the applicant.
- (6) Proof of graduation from a school of dental hygiene accredited by the Commission on Dental Accreditation.
- (7) Proof of satisfactory completion of the Dental Hygiene National Board Examination and of a state or regional clinical licensure examination.
- (8) Proof that the applicant has not failed the examination for licensure to practice dental hygiene under this chapter more than once or once within five years prior to the date of his or her application for a license under this section.
- (9) Documentation of completion of a minimum of 25 units of continuing education earned in the two years preceding application, including completion of any continuing education requirements imposed by the bureau on registered dental hygienists licensed in this state at the time of application.
- (10) Any other information as specified by the bureau to the extent that it is required of applicants for licensure by examination under this article.

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- (b) The bureau may periodically request verification of compliance with the requirements of paragraph (3) of subdivision (b) (a), and may revoke the license upon a finding that the employment requirement or any other requirement of paragraph (3) of that subdivision has not been met.
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39 <del>(d)</del> SB 1472 — 28—

(c) The bureau shall provide in the application packet to each out-of-state dental hygienist pursuant to this section the following information:

- (1) The location of dental manpower shortage areas in the state.
- (2) Any not-for-profit clinics, public hospitals, and accredited dental hygiene education programs seeking to contract with licensees for dental hygiene service delivery or training purposes. (e) (1)
- (d) The bureau shall review the impact of this section on the availability of actively practicing registered dental hygienists in California and report to the appropriate policy and fiscal committees of the Legislature by January 1, 2011. The report shall include a separate section providing data specific to registered dental hygienists who intend to fulfill the alternative clinical practice requirements of subdivision (a). The report shall include, but shall not be limited to, the following:
- (1) The number of applicants from other states who have sought licensure.
- (2) The number of registered dental hygienists from other states licensed pursuant to this section, the number of licenses not granted, and the reason why the license was not granted.
- (3) The practice location of registered dental hygienists licensed pursuant to this section. In identifying a registered dental hygienist's location of practice, the bureau shall use medical service study areas or other appropriate geographic descriptions for regions of the state.
- (4) The number of registered dental hygienists licensed pursuant to this section who establish a practice in a rural area or in an area designated as having a shortage of practicing registered dental hygienists or no registered dental hygienists or in a safety net facility identified in paragraph (3) of subdivision (a).
- (5) The length of time registered dental hygienists licensed pursuant to this section practiced in the reported location.
- 1917.2. (a) The bureau shall license as a registered dental hygienist a third- or fourth-year dental student who is in good standing at an accredited California dental school and who satisfies the following requirements:

<del>(A)</del>

**— 29 —** SB 1472

- 1 (1) Satisfactorily performs on an examination required by the bureau.
  - (B)—a clinical examination and an examination in California law and ethics as prescribed by the bureau.
  - (2) Satisfactorily completes a national written dental hygiene examination approved by the bureau.

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(b) A dental student who is granted a registered dental hygienist license pursuant to this subdivision may only practice in a dental practice that serves patients who are insured under Denti-Cal, the Healthy Families Program, or other government programs, or a dental practice that has a sliding scale fee system based on income.

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(c) Upon receipt of a license to practice dentistry pursuant to Section 1634, a registered dental hygienist license issued pursuant to this subdivision is automatically revoked.

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(d) The dental hygienist license is granted for two years upon passage of the dental hygiene examination, without the ability for renewal.

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(e) Notwithstanding paragraph (4) subdivision (d), if a dental student fails to remain in good standing at an accredited California dental school, or fails to graduate from the dental program, a registered dental hygienist license issued pursuant to this subdivision section shall be revoked. The student shall be responsible for submitting appropriate verifying documentation to the bureau.

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(f) The provisions of paragraphs (1) and (2) this section shall be reviewed pursuant to Division 1.2 (commencing with Section 473). However, the review shall be limited to the fiscal feasibility and impact on the bureau.

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- 36 (g) This subdivision is inoperative as of January 1, 2009.
  - 1917. (a) The bureau shall review the impact of Section 1916 on the availability of actively practicing dental hygienists in California and report to the appropriate policy and fiscal committees of the Legislature by January 1, 2009. The report

SB 1472 -30-

shall include a separate section providing data specific to dental hygienists who intend to fulfill the alternative clinical practice requirements of subdivision (b) of Section 1916. The report shall include, but not be limited to, the following:

- (1) The number of applicants from other states who have sought licensure.
- (2) The number of dental hygienists from other states licensed pursuant to Section 1916, the number of licenses not granted, and the reason why the license was not granted.
- (3) The practice location of dental hygienists licensed pursuant to subdivision (b) of Section 1916.
- (4) The number of dental hygienists licensed pursuant to Section 1916 who establish a practice in a rural area or in an area designated as having a shortage of practicing dental hygienists or no dental hygienists or in a safety net facility identified in paragraph (3) of subdivision (b) of Section 1916.
- (5) The length of time dental hygienists licensed pursuant to Section 1916 practiced in the reported location.
- (b) In identifying a dental hygienist's location of practice, the bureau shall use medical service study areas or other appropriate geographic descriptions for regions of the state.
- 1918. The bureau shall license as a registered dental hygienist in extended functions a person who meets all of the following requirements:
- (a) Holds a valid license issued pursuant to Section 1916 *current license* as a registered dental hygienist *in California*.
- (b) Completes clinical training approved by the bureau in a facility affiliated with a dental school under the direct supervision of the dental school faculty.
- (c) Performs satisfactorily on an examination required by the bureau.
- 1919. The bureau shall adopt regulations necessary to define the functions that may be performed by registered dental hygienists in extended functions, whether the functions require direct or general supervision, and the settings within which registered dental hygienists in extended functions may work.
- 1920. (a) A person who holds a current and active license as a registered dental hygienist in extended functions *or a registered dental hygienist in alternative practice* on January 1, 2007, shall automatically be issued a license as a registered dental hygienist,

-31 - SB 1472

unless the person holds a current and active registered dental hygienist license.

- (b) A registered dental hygienist license issued pursuant to this section shall expire on the same date as the person's prior registered dental hygienist or registered dental hygienist in alternative practice in extended functions license, and shall be subject to the same renewal and other requirements imposed by law or regulation on a license.
- 1921. The bureau shall seek to obtain an injunction against any dental hygienist who provides services in alternative practice pursuant to Sections 1922 to 1931, inclusive, if the bureau has reasonable cause to believe that the services are being provided to a patient who has not received a prescription for those services from a dentist or physician and surgeon licensed to practice in this state.
- 1922. The bureau shall license as a registered dental hygienist in alternative practice a person who demonstrates satisfactory performance on an examination *in California law and ethics* required by the bureau and, subject to Sections 1907 and 1916, who meets either of the following requirements:
- (a) Holds a current California license as a *registered* dental hygienist and meets the following requirements:
- (1) Has been engaged in clinical practice the practice of dental hygiene, as defined in Section 1908, as a dental hygienist in any setting, including, but not limited to, educational settings and public health settings, for a minimum of 2,000 hours during the immediately preceding 36 months.
- (2) Has successfully completed a bachelor's degree or its equivalent from a college or institution of higher education that is accredited by a national agency recognized by the Council on Postsecondary Accreditation or the United States Department of Education, and a minimum of 150 hours of additional educational requirements, as prescribed by the bureau by regulation, that are consistent with good dental and dental hygiene practice, including, but not necessarily limited to, dental hygiene technique and theory including gerontology and medical emergencies, and business administration and practice management.
- (b) Has received a letter of acceptance into the employment utilization phase of the Health Manpower Pilot Project No. 155

SB 1472 — 32—

established by the Office of Statewide Health Planning and
Development pursuant to Article 1 (commencing with Section
128125) of Chapter 3 of Part 3 of Division 107 of the Health and
Safety Code.

1923. (a) Subject to the provisions of Sections 1926 and 1931, the bureau shall adopt regulations in accordance with Section 1906 necessary to implement Sections 1922 and 1924.

(b) The Director of Consumer Affairs shall review the regulations adopted by the bureau in accordance with Section 313.1.

1924. A person licensed as a registered dental hygienist who has completed the prescribed classes through the Health Manpower Pilot Project (HMPP) and who has established an independent practice under the HMPP by June 30, 1997, shall be deemed to have satisfied the licensing requirements under Section 1922, and shall be authorized to continue to operate the practice he or she presently operates, so long as he or she follows the requirements for prescription and functions as specified in Sections 1922, 1925, 1926, 1927, 1928, 1930, and 1931, and subdivision (b) of Section 1929, and as long as he or she continues to personally practice and operate the practice or until he or she sells the practice to a licensed dentist.

1925. A registered dental hygienist in alternative practice may practice, pursuant to Sections 1922, 1923, and 1924, as an employee of a dentist or of another registered dental hygienist in alternative practice, or as an independent contractor, or as a sole proprietor of an alternative dental hygiene practice, or as an employee of a primary care clinic or specialty clinic that is licensed pursuant to Section 1204 of the Health and Safety Code or as an employee of a primary care clinic exempt from licensure pursuant to subdivision (c) of Section 1206 of the Health and Safety Code, or as an employee of a clinic owned or operated by a public hospital or health system, or as an employee of a clinic owned and operated by a hospital that maintains the primary contract with a county government to fill the county's role under Section 17000 of the Welfare and Institutions Code.

1926. A registered dental hygienist in alternative practice may perform the duties authorized pursuant to Sections 1922, 1923, and 1924 in the following settings:

(a) Residences of the homebound.

-33- SB 1472

(b) Schools.

- (c) Residential facilities and other institutions.
- (d) Dental health professional shortage areas, as certified by the Office of Statewide Health Planning and Development in accordance with existing office guidelines.
- 1927. A registered dental hygienist in alternative practice shall not do any of the following:
- (a) Infer, purport, advertise, or imply that he or she is in any way able to provide dental services or make any type of dental health diagnosis beyond evaluating a patient's dental hygiene status, providing a dental hygiene treatment plan, and providing the associated dental hygiene services.
- (b) Hire a registered dental hygienist to provide direct patient services other than a registered dental hygienist in alternative practice.
- 1928. A registered dental hygienist in alternative practice may submit or allow to be submitted any insurance or third-party claims for patient services performed as authorized pursuant to this article.
- 1929. (a) A registered dental hygienist in alternative practice may hire other registered dental hygienists in alternative practice to assist in his or her practice.
- (b) A registered dental hygienist in alternative practice may hire and supervise dental assistants performing functions specified in subdivision (b) of Section 1751.
- 1930. A registered dental hygienist in alternative practice shall provide to the bureau documentation of an existing relationship with at least one dentist for referral, consultation, and emergency services.
- 1931. (a) A registered dental hygienist in alternative practice may perform dental hygiene services for a patient who presents to the registered hygienist in alternative practice a written prescription for dental hygiene services issued by a dentist or physician and surgeon licensed to practice in this state who has performed a physical examination and a diagnosis of the patient prior to the prescription being provided. The prescription shall be valid for a time period based on the dentist's or physician and surgeon's professional judgment, but not to exceed 15 months from the date that it was issued.

SB 1472 — 34—

 (b) The bureau shall seek to obtain an injunction against any registered dental hygienist in alternative practice who provides services pursuant to this section, if the bureau has reasonable cause to believe that the services are being provided to a patient who has not received a prescription for those services from a dentist or physician and surgeon licensed to practice in this state.

- 1932. (a) The bureau may, in its sole discretion, issue a probationary license to an applicant who has satisfied all requirements for licensure as a registered dental hygienist, a registered dental hygienist in alternative practice, or a registered dental hygienist in extended functions. The bureau may require, as a term or condition of issuing the probationary license, that the applicant comply with certain additional requirements, including, but not limited to, the following:
- (1) Successfully completing a professional competency examination.
  - (2) Submitting to a medical or psychological evaluation.
- (3) Submitting to continuing medical or psychological treatment.
  - (4) Abstaining from the use of alcohol or drugs.
- (5) Submitting to random fluid testing for alcohol or controlled substance abuse.
- (6) Submitting to continuing participation in a bureau-approved rehabilitation program.
  - (7) Restricting the type or circumstances of practice.
  - (8) Submitting to continuing education and coursework.
- (9) Complying with requirements regarding notifying the bureau of any change of employer or employment.
  - (10) Complying with probation monitoring.
- (11) Complying with all laws and regulations governing the practice of dentistry.
- (12) Limiting his or her practice to a supervised, structured environment in which his or her activities are supervised by a specified person.
- (b) The term of a probationary license is three years. During the term of the license, a registered dental hygienist, registered dental hygienist in alternative practice, or registered dental hygienist in extended functions the licensee may petition the bureau for a modification of a term or condition of the license or for the issuance of a license that is not probationary.

\_35\_ SB 1472

(c) The proceedings under this section shall be conducted in accordance with the provisions of Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, and the bureau shall have all the powers granted in that chapter.

1933. A licensee shall be issued a substitute license upon request and payment of the required fee. The request shall be accompanied by an affidavit or declaration containing satisfactory evidence of the loss or destruction of the license certificate.

1934. A licensee who changes his or her address of record shall notify the bureau within 30 days of the change. A licensee who changes his or her legal name shall provide the bureau with documentation of the change within 10 days.

1935. If not renewed, a license issued under the provisions of this article, unless specifically excepted, expires at 12 midnight on the last day of the month of the legal birth date of the licensee during the second year of a two-year term. To renew an unexpired license, the licensee shall, before the time at which the license would otherwise expire, apply for renewal on a form prescribed by the bureau and pay the renewal fee prescribed by this article.

1936. Except as otherwise provided in this article, an expired license may be renewed at any time within five years after its expiration by filing an application for renewal on a form prescribed by the bureau and payment of all accrued renewal and delinquency fees. If the license is renewed after its expiration, the licensee, as a condition precedent to renewal, shall also pay the delinquency fee prescribed by this article. Renewal under this section shall be effective on the date on which the application is filed, on the date on which the renewal fee is paid, or on the date on which the delinquency fee, if any, is paid, whichever last occurs. If so renewed, the license shall continue in effect until the expiration date provided in Section 1935 that next occurs after the effective date of the renewal.

1936.1. (a) If the bureau determines that the public health and safety would be served by requiring all holders of licenses under this article to continue their education after receiving a license, the bureau may require, as a condition to license renewal, that licensees submit assurances satisfactory to the

SB 1472 -36-

bureau that they will, during the succeeding two-year period, inform themselves of the developments in the practice of dental hygiene occurring since the original issuance of their licenses by pursuing one or more courses of study satisfactory to the bureau, or by other means deemed equivalent by the bureau. The bureau shall adopt regulations providing for the suspension of the licenses at the end of the two-year period until compliance with the assurances provided for in this section is accomplished.

- (b) The bureau may also, as a condition of license renewal, require licensees to successfully complete a portion of the required continuing education hours in specific areas adopted in regulations by the bureau. The bureau may prescribe this mandatory coursework within the general areas of patient care, health and safety, and law and ethics. The mandatory coursework prescribed by the bureau shall not exceed seven and one-half hours per renewal period. Any mandatory coursework required by the bureau shall be credited toward the continuing education requirements established by the bureau pursuant to subdivision (a).
- (c) The providers of courses referred to in this section shall be approved by the bureau.
- 1937. A suspended license is subject to expiration and shall be renewed as provided in this article. The renewal does not entitle the licensee, while the license remains suspended and until it is reinstated, to engage in the licensed activity or in any other activity or conduct in violation of the order or judgment by which the license was suspended.
- 1938. A revoked license is subject to expiration as provided in this article. A revoked license may not be renewed. If it is reinstated after its expiration, the licensee, as a condition precedent to its reinstatement, shall pay a reinstatement fee in an amount equal to the renewal fee in effect on the last regular renewal date before the date on which it is reinstated and the delinquency fee, if any, accrued at the time of its revocation.
- 1939. A license that is not renewed within five years after its expiration may not be renewed, restored, reinstated, or reissued. The holder of the license may apply for and obtain a new license upon meeting all of the requirements of a new applicant prescribed in this article.

\_37\_ SB 1472

1940. (a) A licensee who desires an inactive license shall submit an application to the bureau on a form provided by the bureau.

- (b) In order to restore an inactive license to active status, the licensee shall submit an application to the bureau on a form provided by the bureau, accompanied by evidence that the licensee has completed the required number of hours of approved continuing education in compliance with this article within the last two years preceding the date of the application.
- (c) The holder of an inactive license shall continue to pay to the bureau the required biennial renewal fee.
- (d) Within 30 days of receiving a request either to restore an inactive license or to inactivate a license, the bureau shall inform the applicant in writing whether the application is complete and accepted for filing or is deficient and, if so, the specific information required to complete the application.
- 1941. It is the intent of the bureau to grant and to renew approval of only those educational programs for a registered dental hygienist, a registered dental hygienist in alternative practice, and a registered dental hygienist in extended functions that continuously maintain a high quality standard of instruction.
- 1942. (a) An educational program for registered dental hygienists that commences operation on or after January 1, 2007, shall apply to the bureau for approval.
- (b) The bureau may approve, provisionally approve, or deny approval of an application made pursuant to subdivision (a). In taking this action, the bureau may, in lieu of conducting its own investigation, accept the findings of any commission or accreditation agency that is approved by the bureau and adopt those findings as its own.
- 1943. (a) The bureau may deny an application to take an examination for licensure as a registered dental hygienist, a registered dental hygienist in alternative practice, or a registered dental hygienist in extended functions at any time prior to licensure:
- (b) The bureau may deny an application for licensure as a registered dental hygienist, registered dental hygienist in alternative practice, or registered dental hygienist in extended functions for any of the following reasons:

SB 1472 — 38—

(1) The applicant committed an act that is a ground for license suspension or revocation under this code or that is a ground for the denial of licensure under Section 480.

- (2) The applicant committed or aided and abetted the commission of any act for which a license is required under this chapter.
- (3) Another state or territory suspended or revoked the license that it had issued to the applicant on a ground that constitutes a basis in this state for the suspension or revocation of licensure under this chapter.
- (4) The applicant failed to meet any requirement under Section 1916, 1918, 1922, or 1924.

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- (b) The proceedings under this section shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, and the bureau shall have all of the powers granted therein.
- 1944. (a) The bureau shall establish by resolution the amount of the fees that relate to the licensing of a registered dental hygienist, a registered dental hygienist in alternative practice, and a registered dental hygienist in extended functions. The fees are subject to the following limitations:
- (1) The application fee for an original license shall not exceed twenty dollars (\$20).
- (2) The fee for examination for licensure as a registered dental hygienist shall not exceed two hundred twenty dollars (\$220).
- (3) For third- and fourth-year dental students, the fee for examination for licensure as a registered dental hygienist shall not exceed the actual cost of the examination.
- (4) The fee for examination for licensure as a registered dental hygienist in extended functions shall not exceed two hundred fifty dollars (\$250).
- (5) The fee for examination for licensure as a registered dental hygienist in alternative practice shall not exceed the actual cost of administering the examination.
- 36 (6) The biennial renewal fee shall not exceed eighty dollars 37 (\$80).
- 38 (7) The delinquency fee shall not exceed twenty-five dollars 39 (\$25) or one-half of the renewal fee, whichever is greater. Any 40 delinquent license may be restored only upon payment of all fees,

-39 - SB 1472

including the delinquency fee, and compliance with all other applicable requirements of this article.

- (8) The fee for issuance of a duplicate license to replace one that is lost or destroyed, or in the event of a name change, shall not exceed twenty-five dollars (\$25) or one-half of the renewal fee, whichever is greater.
- (9) The fee for each curriculum review and site evaluation for educational programs for dental hygienists that are not accredited by a bureau-approved agency, the Council for Private Postsecondary and Vocational Education, or the Chancellor's office of the California Community Colleges shall not exceed one thousand four hundred dollars (\$1,400).
- (10) The fee for each review of radiation safety courses or specialty registration courses courses required for licensure that are not accredited by a bureau-approved agency, the Council for Private Postsecondary and Vocational Education, or the Chancellor's office of the California Community Colleges shall not exceed three hundred dollars (\$300).
- (11) The fee for a provider of continuing education shall not exceed five hundred dollars (\$500) per year.
- (12) The amount of fees payable in connection with permits issued under Section 1962 is as follows:
- (A) The initial permit fee is an amount equal to the renewal fee for the applicant's license to practice dental hygiene in effect on the last regular renewal date before the date on which the permit is issued.
- (B) If the permit will expire less than one year after its issuance, then the initial permit fee is an amount equal to 50 percent of the renewal fee in effect on the last regular renewal date before the date on which the permit is issued.
- (b) The renewal and delinquency fees shall be fixed by the bureau at not more than the current amount of the renewal fee for a license to practice under this chapter nor less than five dollars (\$5).
- (c) Fees fixed by the bureau pursuant to this section shall not be subject to the approval of the Office of Administrative Law.
- (d) Fees collected pursuant to this section shall be collected by the bureau and deposited into the State Dental Hygiene Fund, which is hereby created. All money in this fund is continuously

SB 1472 — 40 —

appropriated to the bureau to implement the provisions of this article.

- (e) No fees or charges other than those listed in this section shall be levied by the bureau in connection with the licensure of registered dental hygienists, registered dental hygienists in alternative practice, or registered dental hygienists in extended functions.
- 1945. On January 1, 2007, a percentage of the funds in the State Dental Auxiliary Fund shall be transferred to the State Dental Hygiene Fund based on the number of registered dental hygienists, registered dental hygienists in alternative practice, and registered dental hygienists in extended practice licensed on January 1, 2007, compared to all dental auxiliaries licensed by the Committee on Dental Auxiliaries on January 1, 2007.
- 1946. The proceedings to deny, suspend, or revoke a license under this article shall be conducted in accordance with the provisions of Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code.
- 1947. A license issued under this article and a license issued under this chapter to a registered dental hygienist, to a registered dental hygienist in alternative practice, or to a registered dental hygienist in extended functions may be revoked or suspended by the bureau for any reason specified in this chapter for the suspension or revocation of a license to practice dental hygiene.
- 1948. (a) If the bureau determines that the public health and safety would be served by requiring all holders of licenses under this article to continue their education after receiving a license, the bureau may require, as a condition to license renewal, that licensees submit assurances satisfactory to the bureau that they will, during the succeeding two-year period, inform themselves of the developments in the practice of dental hygiene occurring since the original issuance of their licenses by pursuing one or more courses of study satisfactory to the bureau, or by other means deemed equivalent by the bureau. The bureau shall adopt regulations providing for the suspension of the licenses at the end of the two-year period until compliance with the assurances provided for in this section is accomplished.
- (b) The bureau may also, as a condition of license renewal, require licentiates to successfully complete a portion of the required continuing education hours in specific areas adopted in

**—41** — SB 1472

regulations by the board. The bureau may prescribe this mandatory coursework within the general areas of patient care, health and safety, and law and ethics. The mandatory coursework prescribed by the bureau shall not exceed seven and one-half hours per renewal period. Any mandatory coursework required by the bureau shall be credited toward the continuing education requirements established by the bureau pursuant to subdivision (a).

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- 1949. A licensee may have his or her license revoked or suspended, or may be reprimanded or placed on probation by the bureau for unprofessional conduct, incompetence, gross negligence, repeated acts of negligence in his or her profession, receiving a license by mistake, or for any other cause applicable to the licentiate provided in this chapter. The proceedings under this article shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, and the bureau shall have all the powers granted therein.
- 1950. (a) A licensee may have his or her license revoked or suspended, or may be reprimanded or placed on probation by the bureau, for conviction of a crime substantially related to the licensee's qualifications, functions, or duties. The record of conviction or a copy certified by the clerk of the court or by the judge in whose court the conviction is had, shall be conclusive evidence of conviction.
- (b) The bureau shall undertake proceedings under this section upon the receipt of a certified copy of the record of conviction. A plea or verdict of guilty or a conviction following a plea of nolo contendere made to a charge of a felony or of any misdemeanor substantially related to the licensee's qualifications, functions, or duties is deemed to be a conviction within the meaning of this section.
- (c) The bureau may order a license suspended or revoked, or may decline to issue a license when any of the following occur:
  - (1) The time for appeal has elapsed.
  - (2) The judgment of conviction has been affirmed on appeal.
- (3) An order granting probation is made suspending the imposition of sentence, irrespective of a subsequent order under any provision of the Penal Code, including, but not limited to, Section 1203.4 of the Penal Code, allowing a person to withdraw

SB 1472 — 42 —

his or her plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, information or indictment.

- 1951. The bureau may discipline a licensee by placing him or her on probation under various terms and conditions that may include, but are not limited to, the following:
- (a) Requiring the licensee to obtain additional training or pass an examination upon completion of training, or both. The examination may be written or oral examinations, or both, and may be a practical or clinical examination, or both, at the option of the bureau.
- (b) Requiring the licensee to submit to a complete diagnostic examination by one or more physicians appointed by the bureau, if warranted by the physical or mental condition of the licensee. If the bureau requires the licensee to submit to an examination, the bureau shall receive and consider any other report of a complete diagnostic examination given by one or more physicians of the licensee's choice.
- (c) Restricting or limiting the extent, scope, or type of practice of the licensee.
- (d) Requiring restitution of fees to the licensee's patients or payers of services unless restitution has already been made.
- (e) Providing the option of alternative community service in lieu of all or part of a period of suspension in cases other than violations relating to quality of care.
- 1952. It is unprofessional conduct for a person licensed under this article to do any of the following:
- (a) Obtain or possess in violation of law, or except as directed by a licensed physician and surgeon, dentist, or podiatrist, administer to himself or herself, a controlled substance, as defined in Division 10 (commencing with Section 11000) of the Health and Safety Code, or any dangerous drug as defined in Article 8 (commencing with Section 4211) of Chapter 9.
- (b) Use a controlled substance, as defined in Division 10 (commencing with Section 11000) of the Health and Safety Code, or a dangerous drug as defined in Article 8 (commencing with Section 4211) of Chapter 9, or alcoholic beverages or other intoxicating substances, to an extent or in a manner dangerous or injurious to himself or herself, to any person, or the public to the

\_\_43\_\_ SB 1472

extent that the use impairs the licensee's ability to conduct with safety to the public the practice authorized by his or her license.

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- (c) The conviction of a charge of violating any federal statute or rules, or any statute or rule of this state, regulating controlled substances, as defined in Division 10 (commencing with Section 11000) of the Health and Safety Code, or any dangerous drug, as defined in Article 8 (commencing with Section 4211) of Chapter 9, or the conviction of more than one misdemeanor, or any felony, involving the use or consumption of alcohol or drugs, if the conviction is substantially related to the practice authorized by his or her license. The record of conviction or a copy certified by the clerk of the court or by the judge in whose court the conviction is had, shall be conclusive evidence of a violation of this section. A plea or verdict of guilty or a conviction following a plea of nolo contendere is deemed to be a conviction within the meaning of this section; the bureau may order the license suspended or revoked, or may decline to issue a license, when the time for appeal has elapsed or the judgment of conviction has been affirmed on appeal, or when an order granting probation is made suspending imposition of sentence, irrespective of a subsequent order under any provision of the Penal Code, including, but not limited to, Section 1203.4 of the Penal Code, allowing a person to withdraw his or her plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, information or indictment.
- 1953. (a) A registered dental hygienist, registered dental hygienist in alternative practice, or registered dental hygienist in extended functions who performs a service on a patient in a dental office shall identify himself or herself in the patient record by signing his or her name or identification number and initials next to the service performed, and shall date those treatment entries in the record.
- (b) A repeated violation of this section constitutes unprofessional conduct.
- 1954. (a) It is unprofessional conduct for a person licensed under this article to perform, or hold himself or herself out as able to perform, professional services beyond the scope of his or her license and field of competence, as established by his or her education, experience, and training. This includes, but is not limited to, using an instrument or device in a manner that is not

SB 1472 — 44—

in accordance with the customary standards and practices of the dental hygiene profession.

- (b) This section shall not apply to research conducted by accredited dental schools or dental hygiene schools, or to research conducted pursuant to an investigational device exemption issued by the United States Food and Drug Administration.
- 1955. (a) (1) A licensee who fails or refuses to comply with a request for a patient's dental hygiene records that is accompanied by that patient's written authorization for release of the records to the bureau, within 15 days of receiving the request and authorization, shall pay to the bureau a civil penalty of two hundred fifty dollars (\$250) per day for each day that the documents have not been produced after the 15th day, up to a maximum of five thousand dollars (\$5,000) unless the licensee is unable to provide the documents within this time period for good cause.
- (2) A health care facility shall comply with a request for the dental hygiene records of a patient that is accompanied by that patient's written authorization for release of records to the bureau together with a notice citing this section and describing the penalties for failure to comply with this section. Failure to provide the authorizing patient's dental hygiene records to the board within 30 days of receiving this request, authorization, and notice shall subject the health care facility to a civil penalty, payable to the bureau, of up to two hundred fifty dollars (\$250) per day for each day that the documents have not been produced after the 30th day, up to a maximum of five thousand dollars (\$5,000), unless the health care facility is unable to provide the documents within this time period for good cause. This paragraph shall not require health care facilities to assist the bureau in obtaining the patient's authorization. The bureau shall pay the reasonable cost of copying the dental hygiene records.
- (b) (1) A licensee who fails or refuses to comply with a court order issued in the enforcement of a subpoena mandating the release of records to the bureau shall pay to the bureau a civil penalty of one thousand dollars (\$1,000) per day for each day that the documents have not been produced after the date by which the court order requires the documents to be produced, unless it is determined that the order is unlawful or invalid. Any

\_45\_ SB 1472

statute of limitations applicable to the filing of an accusation by the bureau shall be tolled during the period the licensee is out of compliance with the court order and during any related appeals.

- (2) A licensee who fails or refuses to comply with a court order issued in the enforcement of a subpoena mandating the release of records to the bureau is guilty of a misdemeanor punishable by a fine payable to the bureau not to exceed five thousand dollars (\$5,000). The fine shall be added to the licensee's renewal fee if it is not paid by the next succeeding renewal date. Any statute of limitations applicable to the filing of an accusation by the bureau shall be tolled during the period the licensee is out of compliance with the court order and during any related appeals.
- (3) A health care facility that fails or refuses to comply with a court order issued in the enforcement of a subpoena mandating the release of patient records to the bureau, that is accompanied by a notice citing this section and describing the penalties for failure to comply with this section, shall pay to the bureau a civil penalty of up to one thousand dollars (\$1,000) per day for each day that the documents have not been produced, up to ten thousand dollars (\$10,000), after the date by which the court order requires the documents to be produced, unless it is determined that the order is unlawful or invalid. Any statute of limitations applicable to the filing of an accusation by the bureau against a licensee shall be tolled during the period the health care facility is out of compliance with the court order and during any related appeals.
- (4) A health care facility that fails or refuses to comply with a court order, issued in the enforcement of a subpoena, mandating the release of records to the bureau is guilty of a misdemeanor punishable by a fine payable to the bureau not to exceed five thousand dollars (\$5,000). Any statute of limitations applicable to the filing of an accusation by the bureau against a licensee shall be tolled during the period the health care facility is out of compliance with the court order and during any related appeals.
- (c) Multiple acts by a licensee in violation of subdivision (b) shall be punishable by a fine not to exceed five thousand dollars (\$5,000) or by imprisonment in a county jail not exceeding six months, or by both that fine and imprisonment. Multiple acts by a health care facility in violation of subdivision (b) shall be

SB 1472 — 46 —

punishable by a fine not to exceed five thousand dollars (\$5,000) and shall be reported to the State Department of Health Services and shall be considered as grounds for disciplinary action with respect to licensure, including suspension or revocation of the license or certificate.

- (d) A failure or refusal to comply with a court order issued in the enforcement of a subpoena mandating the release of records to the bureau constitutes unprofessional conduct and is grounds for suspension or revocation of his or her license.
- (e) Imposition of the civil penalties authorized by this section shall be in accordance with the Administrative Procedure Act (Chapter 5 (commencing with Section 11500) of Division 3 of Title 2 of the Government Code).
- (f) For the purposes of this section, a "health care facility" means a clinic or health care facility licensed or exempt from licensure pursuant to Division 2 (commencing with Section 1200) of the Health and Safety Code.
- 1956. It is unprofessional conduct for a person licensed under this article to require, either directly or through an office policy, or knowingly permit the delivery of dental hygiene care that discourages necessary treatment, or permits clearly excessive, incompetent, unnecessary, or grossly negligent treatment, or repeated negligent acts, as determined by the standard of practice in the community.
- 1957. (a) A person whose license has been revoked or suspended, who has been placed on probation, or whose license was surrendered pursuant to a stipulated settlement as a condition to avoid a disciplinary administrative hearing, may petition the bureau for reinstatement or modification of penalty, including modification or termination of probation, after a period of not less than the following minimum periods have elapsed from the effective date of the decision ordering disciplinary action:
- (1) At least three years for reinstatement of a license revoked for unprofessional conduct or surrendered pursuant to a stipulated settlement as a condition to avoid an administrative disciplinary hearing.
- (2) At least two years for early termination, or modification of a condition, of a probation of three years or more.
- 39 (3) At least one year for modification of a condition, or 40 reinstatement of a license revoked for mental or physical illness,

\_\_47\_\_ SB 1472

1 or termination, or modification of a condition, of a probation of 2 less than three years.

(b) The petition shall state any fact required by the bureau.

- (c) The petition may be heard by the bureau, or the bureau may assign the petition to an administrative law judge designated in Section 11371 of the Government Code.
- (d) In considering reinstatement or modification or penalty, the bureau or the administrative law judge hearing the petition may consider the following:
- (1) All activities of the petitioner since the disciplinary action was taken.
  - (2) The offense for which the petitioner was disciplined.
- (3) The petitioner's activities during the time the license, certificate, or permit was in good standing.
- (4) The petitioner's rehabilitative efforts, general reputation for truth, and professional ability.
- (e) The hearing may be continued from time to time as the bureau or the administrative law judge as designated in Section 11371 of the Government Code finds necessary.
- (f) The bureau or the administrative law judge may impose necessary terms and conditions on the licentiate in reinstating a license, certificate, or permit or modifying a penalty.
- (g) A petition shall not be considered while the petitioner is under sentence for any criminal offense, including any period during which the petitioner is on court-imposed probation or parole.
- (h) A petition shall not be considered while there is an accusation or petition to revoke probation pending against the person.
- (i) The bureau may deny without a hearing or argument any petition filed pursuant to this section within a period of two years from the effective date of the prior decision following a hearing under this section. Nothing in this section shall be deemed to alter Sections 822 and 823.
- 1958. A person, company, or association is guilty of a misdemeanor, and upon conviction, shall be punished by imprisonment in a county jail not less than 10 days nor more than one year, or by a fine of not less than one hundred dollars (\$100) nor more than one thousand five hundred dollars

SB 1472 — 48—

1 (\$1,500), or by both fine and imprisonment, who does any of the following:

- (a) Assumes the title of "registered dental hygienist," "registered dental hygienist in alternative practice" or "registered dental hygienist in extended functions" or appends the letters "R.D.H.," "R.D.H.A.P." or "R.D.H.E.F." to his or her name without having had the right to assume the title conferred upon him or her through licensure.
- (b) Assumes any title, or appends any letters to his or her name, with the intent to represent falsely that he or she has received a dental hygiene degree or a license under this article.
- (c) Engages in the practice of dental hygiene without causing to be displayed in a conspicuous place in his or her office his or her license under this article to practice dental hygiene.
- (d) Within 10 days after demand is made by the executive officer of the bureau, fails to furnish to the bureau the name and address of all persons practicing or assisting in the practice of dental hygiene in the office of the person, company, or association, at any time within 60 days prior to the demand, together with a sworn statement showing under and by what license or authority this person, company, or association and any employees are or have been practicing or assisting in the practice of dental hygiene. This sworn statement shall not be used in any prosecution under this section.
- (e) Is under the influence of alcohol or a controlled substance while engaged in the practice of dental hygiene in actual attendance on patients to an extent that impairs his or her ability to conduct the practice of dental hygiene with safety to patients and the public.
- 1959. A person who holds a valid, unrevoked, and unsuspended certificate as a registered dental hygienist, registered dental hygienist in alternative practice, or registered dental hygienist in extended functions under this article may append the letters "R.D.H.," "R.D.H.A.P.," or "R.D.H.E.F." to his or her name.
- 1960. For the first offense, a person is guilty of a misdemeanor and shall be punishable by a fine of not less than two hundred dollars (\$200) or more than three thousand dollars (\$3,000), or by imprisonment in a county jail for not to exceed six months, or both, and for the second or a subsequent offense is

-49 - SB 1472

guilty of a felony and upon conviction thereof shall be punished by a fine of not less than two thousand dollars (\$2,000) nor more than six thousand dollars (\$6,000), or by imprisonment in the state prison, or by both that fine and imprisonment, who does any of the following:

- (a) Sells or barters or offers to sell or barter a dental hygiene degree or transcript or a license issued under, or purporting to be issued under, laws regulating licensure of dental hygienists.
- (b) Purchases or procures by barter a diploma, license, or transcript with intent that it shall be used in evidence of the holder's qualification to practice dental hygiene, or in fraud of the laws regulating the practice of dental hygiene.
- (c) With fraudulent intent, makes, attempts to make, counterfeits, or materially alters a diploma, certificate, or transcript.
- (d) Uses, or attempts or causes to be used, any diploma, certificate, or transcript that has been purchased, fraudulently issued, counterfeited, or materially altered or in order to procure licensure as a registered dental hygienist, registered dental hygienist in alternative practice, or registered dental hygienist in extended functions.
- (e) In an affidavit required of an applicant for an examination or license under this article, willfully makes a false statement in a material regard.
- (f) Practices dental hygiene or offers to practice dental hygiene, as defined in this article, either without a license, or when his or her license has been revoked or suspended.
- (g) Under any false, assumed or fictitious name, either as an individual, firm, corporation or otherwise, or any name other than the name under which he or she is licensed, practices, advertises, or in any other manner indicates that he or she practices or will practice dental hygiene, except a name specified in a valid permit issued pursuant to Section 1962.
- 1961. A person who willfully, under circumstances that cause risk of bodily harm, serious physical or mental illness, or death, practices, attempts to practice, advertises, or holds himself or herself out as practicing dental hygiene without having at the time of so doing a valid, unrevoked, and unsuspended license as provided in this chapter, is guilty of a crime, punishable by imprisonment in a county jail for up to one year. The remedy

SB 1472 — 50 —

provided in this section shall not preclude any other remedy provided by law.

- 1962. (a) An association, partnership, corporation, or group of three or more registered dental hygienists, registered dental hygienists in alternative practice, or registered dental hygienists in extended functions engaging in practice under a name that would otherwise be in violation of Section 1960, may practice under that name if the association, partnership, corporation, or group holds an unexpired, unsuspended, and unrevoked permit issued by the bureau under this section.
- (b) An individual registered dental hygienist, registered dental hygienist in alternative practice, or registered dental hygienist in extended functions, or a pair of registered dental hygienists, registered dental hygienists in alternative practice, or registered dental hygienists in extended functions who practice dental hygiene under a name that would otherwise violate Section 1960 may practice under that name if the licensees hold a valid permit issued by the bureau under this section. The bureau shall issue a written permit authorizing the holder to use a name specified in the permit in connection with the holder's practice if the bureau finds all of the following:
- (1) The applicant or applicants are duly licensed registered dental hygienists, registered dental hygienists in alternative practice, or registered dental hygienists in extended functions.
- (2) The place where the applicant or applicants practice is owned or leased by the applicant or applicants, and the practice conducted at the place is wholly owned and entirely controlled by the applicant or applicants.
- (3) The name under which the applicant or applicants propose to operate contains at least one of the following designations: "dental hygiene group," "dental hygiene practice," or "dental hygiene office," contains the family name of one or more of the past, present, or prospective associates, partners, shareholders, or members of the group, and is in conformity with Section 651 and not in violation of subdivisions (i) and (*l*) of Section 1680.
- (4) All licensed persons practicing at the location designated in the application hold valid licenses and no charges of unprofessional conduct are pending against any person practicing at that location.

\_51\_ SB 1472

(c) A permit issued under this section shall expire and become invalid unless renewed in the manner provided for in this article for the renewal of certificates issued under this article.

- (d) A permit issued under this section may be revoked or suspended if the bureau finds that any requirement for original issuance of a permit is no longer being fulfilled by the permitholder. Proceedings for revocation or suspension shall be governed by the Administrative Procedure Act.
- (e) If charges of unprofessional conduct are filed against the holder of a permit issued under this section, or a member of an association, partnership, group, or corporation to whom a permit has been issued under this section, proceedings shall not be commenced for revocation or suspension of the permit until a final determination of the charges of unprofessional conduct, unless the charges have resulted in revocation or suspension of a license.

1963. The bureau may prefer a complaint for violation of any part of this article before any court of competent jurisdiction and may, by its officers, counsel and agents, assist in presenting the law or facts at the trial. The district attorney of each county in this state shall prosecute all violations of this article in their respective counties in which the violations occur.

1964. In addition to the other proceedings provided for in this article, on application of the bureau, the superior court of any county shall issue an injunction to restrain an unlicensed person from conducting the practice of dental hygiene, as defined in this article.

1965. If a person has engaged in or is about to engage in an act that constitutes an offense against this chapter, the superior court of any county, on application of 10 or more persons holding licenses to practice dental hygiene issued under this article, may issue an injunction or other appropriate order restraining that conduct. Proceedings under this section shall be governed by Chapter 3 (commencing with Section 525) of Title 7 of Part 2 of the Code of Civil Procedure.

1966. (a) An applicant for licensure under this article shall furnish fingerprint cards for submission to state and federal eriminal justice agencies, including, but not limited to, the Federal Bureau of Investigation, in order to establish the identity of the applicant and in order to determine whether the applicant

**— 52 — SB 1472** 

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has a record of any criminal convictions in this state or in any other jurisdiction, including foreign countries. 3

- (b) The information obtained as a result of the fingerprinting shall be used in accordance with Section 11105 of the Penal Code, and to determine whether the applicant is subject to denial of licensure pursuant to Division 1.5 (commencing with Section 475), or Section 1628.5.
- 1967. The bureau shall adopt regulations to implement the requirements of this article on matters including, but not limited to, the following:
  - (a) Educational standards, admissions criteria, and curriculum.
  - (b) Application and examination requirements.
- (e) Continuing education requirements and certification of continuing education providers.
- 1968. All moneys collected pursuant to this article shall be deposited in the State Dental Hygiene Fund, unless otherwise specified.
- 1966. (a) It is the intent of the Legislature that the bureau seek ways and means to identify and rehabilitate licensees whose competency may be impaired due to abuse of dangerous drugs or alcohol, so that licensees so afflicted may be treated and returned to the practice of dental hygiene in a manner that will not endanger the public health and safety. It is also the intent of the Legislature that the bureau establish a diversion program as a voluntary alternative approach to traditional disciplinary actions.
- (b) One or more diversion evaluation committees shall be established by the bureau. The bureau shall establish criteria for the selection of each committee. Each member of a diversion evaluation committee shall receive per diem and expenses as provided in Section 103.
- 1966.1. (a) The bureau shall establish criteria for the acceptance, denial, or termination of licensees in a diversion program. Unless ordered by the bureau as a condition of a licensee's disciplinary probation, only those licencees who have voluntarily requested diversion treatment and supervision by a diversion evaluation committee shall participate in a diversion program.

\_53\_ SB 1472

(b) A licensee who is not the subject of a current investigation may self-refer to the diversion program on a confidential basis, except as provided in subdivision (f).

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- (c) A licensee under current investigation by the bureau may also request entry into a diversion program by contacting the bureau. The bureau may refer the licensee requesting participation in the program to a diversion evaluation committee for evaluation of eligibility. Prior to authorizing a licensee to enter into the diversion program, the bureau may require the licensee, while under current investigation for any violations of this article or other violations, to execute a statement of understanding that states that the licensee understands that his or her violations of this article or other statutes, that would otherwise be the basis for discipline, may still be investigated and the subject of disciplinary action.
- (d) If the reasons for a current investigation of a licensee are based primarily on the self-administration of any controlled substance or dangerous drugs or alcohol under Section 1681, or the illegal possession, prescription, or nonviolent procurement of substance anv controlled or dangerous drugs self-administration that does not involve actual, direct harm to the public, the bureau shall close the investigation without further action if the licensee is accepted into the bureau's diversion program and successfully completes the requirements of the program. If the licensee withdraws or is terminated from the program by a diversion evaluation committee, the investigation shall be reopened and disciplinary action imposed, if warranted, as determined by the bureau.
- (e) Neither acceptance nor participation in the diversion program shall preclude the bureau from investigating or continuing to investigate, or taking disciplinary action or continuing to take disciplinary action against, any licensee for any unprofessional conduct committed before, during, or after participation in the diversion program.
- (f) All licensees shall sign an agreement of understanding that the withdrawal or termination from the diversion program at a time when a diversion evaluation committee determines the licensee presents a threat to the public's health and safety shall result in the utilization by the bureau of diversion treatment records in disciplinary or criminal proceedings.

SB 1472 — 54—

(g) Any licensee terminated from the diversion program for failure to comply with program requirements is subject to disciplinary action by the bureau for acts committed before, during, and after participation in the diversion program. A licensee who has been under investigation by the bureau and has been terminated from the diversion program by a diversion evaluation committee shall be reported by the diversion evaluation committee to the bureau.

1966.2. Each diversion evaluation committee shall have the following duties and responsibilities:

- (a) To evaluate those licensees who request to participate in the diversion program according to the guidelines prescribed by the bureau and to consider the recommendations of any licensees designated by the bureau to serve as consultants on the admission of the licensee to the diversion program.
- (b) To review and designate those treatment facilities to which licensees in a diversion program may be referred.
- (c) To receive and review information concerning a licensee participating in the program.
- (d) To consider in the case of each licensee participating in a program whether he or she may safely continue or resume the practice of dental hygiene.
- (e) To perform other related duties as the bureau may by regulation require.
- 1966.3. Notwithstanding the provisions of Article 9 (commencing with Section 11120) of Chapter 1 of Part 1 of Division 3 of Title 2 of the Government Code, relating to public meetings, a diversion evaluation committee may convene in closed session to consider reports pertaining to any licentiate requesting or participating in a diversion program. A committee shall only convene in closed session to the extent that it is necessary to protect the privacy of a licensee.
- 1966.4. Each licensee who requests participation in a diversion program shall agree to cooperate with the treatment program designed by a diversion evaluation committee and to bear all costs related to the program, unless the cost is waived by the bureau. Any failure to comply with the provisions of a treatment program may result in termination of the licensee's participation in a program.

\_55\_ SB 1472

1966.5. (a) After a diversion evaluation committee, in its discretion, has determined that a licensee has been rehabilitated and the diversion program is completed, the diversion evaluation committee shall purge and destroy all records pertaining to the licensee's participation in the diversion program.

(b) Except as authorized by subdivision (f) of Section 1966.1, all bureau and diversion evaluation committee records and records of proceedings pertaining to the treatment of a licensee in a program shall be kept confidential and are not subject to discovery or subpoena.

1966.6. The bureau shall provide for the representation of any person making reports to a diversion evaluation committee or the bureau under this article in any action for defamation for reports or information given to the diversion evaluation committee or the bureau regarding a licensee's participation in the diversion program.

SEC. 29. Section 4999.2 of the Business and Professions Code is amended to read:

4999.2. (a) In order to obtain and maintain a registration, in-state or out-of-state telephone medical advice services shall comply with the requirements established by the department. Those requirements shall include, but shall not be limited to, all of the following:

- (1) (A) Ensuring that all staff who provide medical advice services are appropriately licensed, certified, or registered as a physician and surgeon pursuant to Chapter 5 (commencing with Section 2000) or the Osteopathic Initiative Act, as a dentist or dental hygienist pursuant to Chapter 4 (commencing with Section 1600), as a psychologist pursuant to Chapter 6.6 (commencing with Section 2900), as a marriage and family therapist pursuant to Chapter 13 (commencing with Section 4980), as a licensed clinical social worker pursuant to Chapter 14 (commencing with Section 4990), as an optometrist pursuant to Chapter 7 (commencing with Section 3000), or as a chiropractor pursuant to the Chiropractic Initiative Act, and operating consistent with the laws governing their respective scopes of practice in the state within which they provide telephone medical advice services, except as provided in paragraph (2).
- (B) Ensuring that all staff who provide telephone medical advice services from an out-of-state location are health care

SB 1472 — 56 —

professionals, as identified in subparagraph (A), who are licensed, registered, or certified in the state within which they are providing the telephone medical advice services and are operating consistent with the laws governing their respective scopes of practice.

- (2) Ensuring that all registered nurses providing telephone medical advice services to both in-state and out-of-state business entities registered pursuant to this chapter are licensed pursuant to Chapter 6 (commencing with Section 2700).
- (3) Ensuring that the telephone medical advice provided is consistent with good professional practice.
- (4) Maintaining records of telephone medical advice services, including records of complaints, provided to patients in California for a period of at least five years.
- (5) Ensuring that no staff member uses a title or designation when speaking to an enrollee or subscriber that may cause a reasonable person to believe that the staff member is a licensed, certified, or registered professional described in subparagraph (A) of paragraph (1), unless the staff member is a licensed, certified, or registered professional.
- (6) Complying with all directions and requests for information made by the department.
- (b) To the extent permitted by Article VII of the California Constitution, the department may contract with a private nonprofit accrediting agency to evaluate the qualifications of applicants for registration pursuant to this chapter and to make recommendations to the department.
- SEC. 30. Section 4999.7 of the Business and Professions Code is amended to read:
- 4999.7. (a) Nothing in this section shall limit, preclude, or otherwise interfere with the practices of other persons licensed or otherwise authorized to practice, under any other provision of this division, telephone medical advice services consistent with the laws governing their respective scopes of practice, or licensed under the Osteopathic Initiative Act or the Chiropractic Initiative Act and operating consistent with the laws governing their respective scopes of practice.
- 38 (b) For the purposes of this chapter, "telephone medical 39 advice" means a telephonic communication between a patient 40 and a health care professional in which the health care

\_\_57\_\_ SB 1472

professional's primary function is to provide to the patient a telephonic response to the patient's questions regarding his or her or a family member's medical care or treatment. "Telephone medical advice" includes assessment, evaluation, or advice provided to patients or their family members.

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(c) For the purposes of this chapter, "health care professional" is a staff person described in Section 4999.2 who provides medical advice services and is appropriately licensed, certified, or registered as a registered nurse pursuant to Chapter 6 (commencing with Section 2700), as a physician and surgeon pursuant to Chapter 5 (commencing with Section 2000) or the Osteopathic Initiative Act, as a dentist or dental hygienist pursuant to Chapter 4 (commencing with Section 1600), as a psychologist pursuant to Chapter 6.6 (commencing with Section 2900), as a marriage and family therapist pursuant to Chapter 13 (commencing with Section 4980), as a licensed clinical social worker pursuant to Chapter 14 (commencing with Section 4990), as an optometrist pursuant to Chapter 7 (commencing with Section 3000), or as a chiropractor pursuant to the Chiropractic Initiative Act, and who is operating consistent with the laws governing his or her respective scopes of practice in the state in which he or she provides telephone medical advice services.

SEC. 31. Section 44876 of the Education Code is amended to read:

44876. The qualifications for a dental hygienist shall be a valid license issued by the California Dental Hygiene Bureau or by the Dental Board of California and either a health and development credential, a standard designated services credential with a specialization in health, or a services credential with a specialization in health.

SEC. 32. Section 1348.8 of the Health and Safety Code is amended to read:

1348.8. (a) Every health care service plan that provides, operates, or contracts for, telephone medical advice services to its enrollees and subscribers shall do all of the following:

(1) Ensure that the in-state or out-of-state telephone medical advice service is registered pursuant to Chapter 15 (commencing with Section 4999) of Division 2 of the Business and Professions Code.

SB 1472 — 58—

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39 40 (2) Ensure that the staff providing telephone medical advice services for the in-state or out-of-state telephone medical advice service are licensed as follows:

- (A) For full service health care service plans, the staff hold a valid California license as a registered nurse or a valid license in the state within which they provide telephone medical advice services as a physician and surgeon or physician assistant, and are operating in compliance with the laws governing their respective scopes of practice.
- (B) (i) For specialized health care service plans providing, operating, or contracting with a telephone medical advice service in California, the staff shall be appropriately licensed, registered, or certified as a physician and surgeon pursuant to Chapter 5 (commencing with Section 2000) of Division 2 of the Business and Professions Code or the Osteopathic Initiative Act, as a registered nurse pursuant to Chapter 6 (commencing with Section 2700) of Division 2 of the Business and Professions Code, as a dentist or a dental hygienist pursuant to Chapter 4 (commencing with Section 1600) of Division 2 of the Business and Professions Code, as a psychologist pursuant to Chapter 6.6 (commencing with Section 2900) of Division 2 of the Business and Professions Code, as a marriage and family therapist pursuant to Chapter 13 (commencing with Section 4980) of Division 2 of the Business and Professions Code, as a licensed clinical social worker pursuant to Chapter 14 (commencing with Section 4990) of Division 2 of the Business and Professions Code, as an optometrist pursuant to Chapter 7 (commencing with Section 3000) of Division 2 of the Business and Professions Code, or as a chiropractor pursuant to the Chiropractic Initiative Act, and operating in compliance with the laws governing their respective scopes of practice.
- (ii) For specialized health care service plans providing, operating, or contracting with an out-of-state telephone medical advice service, the staff shall be health care professionals, as identified in clause (i), who are licensed, registered, or certified in the state within which they are providing the telephone medical advice services and are operating in compliance with the laws governing their respective scopes of practice. All registered nurses providing telephone medical advice services to both in-state and out-of-state business entities registered pursuant to

\_59\_ SB 1472

this chapter shall be licensed pursuant to Chapter 6 (commencing with Section 2700) of Division 2 of the Business and Professions Code.

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- (3) Ensure that every full service health care service plan provides for a physician and surgeon who is available on an on-call basis at all times the service is advertised to be available to enrollees and subscribers.
- (4) Ensure that staff members handling enrollee or subscriber calls, who are not licensed, certified, or registered as required by paragraph (2), do not provide telephone medical advice. Those staff members may ask questions on behalf of a staff member who is licensed, certified, or registered as required by paragraph (2), in order to help ascertain the condition of an enrollee or subscriber so that the enrollee or subscriber can be referred to licensed staff. However, under no circumstances shall those staff members use the answers to those questions in an attempt to assess, evaluate, advise, or make any decision regarding the condition of an enrollee or subscriber or determine when an enrollee or subscriber needs to be seen by a licensed medical professional.
- (5) Ensure that no staff member uses a title or designation when speaking to an enrollee or subscriber that may cause a reasonable person to believe that the staff member is a licensed, certified, or registered professional described in Section 4999.2 unless the staff member is a licensed, certified, or registered professional.
- (6) Ensure that the in-state or out-of-state telephone medical advice service designates an agent for service of process in California and files this designation with the director.
- (7) Requires that the in-state or out-of-state telephone medical advice service makes and maintains records for a period of five years after the telephone medical advice services are provided, including, but not limited to, oral or written transcripts of all medical advice conversations with the health care service plan's enrollees or subscribers in California and copies of all complaints. If the records of telephone medical advice services are kept out of state, the health care service plan shall, upon the request of the director, provide the records to the director within 10 days of the request.

SB 1472 -60-

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(8) Ensure that the telephone medical advice services are provided consistent with good professional practice.

- (b) The director shall forward to the Department of Consumer Affairs, within 30 days of the end of each calendar quarter, data regarding complaints filed with the department concerning telephone medical advice services.
- (c) For the purposes of this section, "telephone medical advice" means a telephonic communication between a patient and a health care professional in which the health care professional's primary function is to provide to the patient a telephonic response to the patient's questions regarding his or her or a family member's medical care or treatment. "Telephone medical advice" includes assessment, evaluation, or advice provided to patients or their family members.
- SEC. 33. Section 128160 of the Health and Safety Code is amended to read:
- 17 128160. (a) Pilot projects may be approved in the following 18 fields:
  - (1) Expanded role medical auxiliaries.
  - (2) Expanded role nursing.
- 21 (3) Expanded role dental auxiliaries, dental hygienists, dental hygienists in alternative practice, or dental hygienists in extended functions.
  - (4) Maternal child care personnel.
  - (5) Pharmacy personnel.
    - (6) Mental health personnel.
  - (7) Other health care personnel including, but not limited to, veterinary personnel, chiropractic personnel, podiatric personnel, geriatric care personnel, therapy personnel, and health care technicians.
  - (b) Projects that operate in rural and central city areas shall be given priority.
  - SEC. 34. Section 14132 of the Welfare and Institutions Code is amended to read:
  - 14132. The following is the schedule of benefits under this chapter:
- 37 (a) Outpatient services are covered as follows:
- 38 Physician, hospital or clinic outpatient, surgical center,
- 39 respiratory care, optometric, chiropractic, psychology, podiatric,
- 40 occupational therapy, physical therapy, speech therapy,

-61- SB 1472

audiology, acupuncture to the extent federal matching funds are provided for acupuncture, and services of persons rendering treatment by prayer or healing by spiritual means in the practice of any church or religious denomination insofar as these can be encompassed by federal participation under an approved plan, subject to utilization controls.

- (b) Inpatient hospital services, including, but not limited to, physician and podiatric services, physical therapy and occupational therapy, are covered subject to utilization controls.
- (c) Nursing facility services, subacute care services, and services provided by any category of intermediate care facility for the developmentally disabled, including podiatry, physician, nurse practitioner services, and prescribed drugs, as described in subdivision (d), are covered subject to utilization controls. Respiratory care, physical therapy, occupational therapy, speech therapy, and audiology services for patients in nursing facilities and any category of intermediate care facility for the developmentally disabled are covered subject to utilization controls.
- (d) Purchase of prescribed drugs is covered subject to the Medi-Cal List of Contract Drugs and utilization controls.
- (e) Outpatient dialysis services and home hemodialysis services, including physician services, medical supplies, drugs and equipment required for dialysis, are covered, subject to utilization controls.
- (f) Anesthesiologist services when provided as part of an outpatient medical procedure, nurse anesthetist services when rendered in an inpatient or outpatient setting under conditions set forth by the director, outpatient laboratory services, and X-ray services are covered, subject to utilization controls. Nothing in this subdivision shall be construed to require prior authorization for anesthesiologist services provided as part of an outpatient medical procedure or for portable X-ray services in a nursing facility or any category of intermediate care facility for the developmentally disabled.
  - (g) Blood and blood derivatives are covered.
- (h) Emergency and essential diagnostic and restorative dental services, except for orthodontic, fixed bridgework, and partial dentures that are not necessary for balance of a complete artificial denture, are covered, subject to utilization controls. The

SB 1472 -62-

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utilization controls shall allow emergency and essential diagnostic and restorative dental services and prostheses that are 3 necessary to prevent a significant disability or to replace 4 previously furnished prostheses which are lost or destroyed due 5 circumstances beyond the beneficiary's Notwithstanding the foregoing, the director may by regulation 6 7 provide for certain fixed artificial dentures necessary for 8 obtaining employment or for medical conditions that preclude the use of removable dental prostheses, and for orthodontic services in cleft palate deformities administered by the department's 10 California Children Services Program. 11

- (i) Medical transportation is covered, subject to utilization controls.
- (j) Home health care services are covered, subject to utilization controls.
- (k) Prosthetic and orthotic devices and eyeglasses are covered, subject to utilization controls. Utilization controls shall allow replacement of prosthetic and orthotic devices and eyeglasses necessary because of loss or destruction due to circumstances beyond the beneficiary's control. Frame styles for eyeglasses replaced pursuant to this subdivision shall not change more than once every two years, unless the department so directs.

Orthopedic and conventional shoes are covered when provided by a prosthetic and orthotic supplier on the prescription of a physician and when at least one of the shoes will be attached to a prosthesis or brace, subject to utilization controls. Modification of stock conventional or orthopedic shoes when medically indicated, is covered subject to utilization controls. When there is a clearly established medical need that cannot be satisfied by the modification of stock conventional or orthopedic shoes, custom-made orthopedic shoes are covered, subject to utilization controls.

Therapeutic shoes and inserts are covered when provided to beneficiaries with a diagnosis of diabetes, subject to utilization controls, to the extent that federal financial participation is available.

(*l*) Hearing aids are covered, subject to utilization controls. Utilization controls shall allow replacement of hearing aids necessary because of loss or destruction due to circumstances beyond the beneficiary's control.

-63- SB 1472

(m) Durable medical equipment and medical supplies are covered, subject to utilization controls. The utilization controls shall allow the replacement of durable medical equipment and medical supplies when necessary because of loss or destruction due to circumstances beyond the beneficiary's control. The utilization controls shall allow authorization of durable medical equipment needed to assist a disabled beneficiary in caring for a child for whom the disabled beneficiary is a parent, stepparent, foster parent, or legal guardian, subject to the availability of federal financial participation. The department shall adopt emergency regulations to define and establish criteria for assistive durable medical equipment in accordance with the rulemaking provisions of the Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code).

- (n) Family planning services are covered, subject to utilization controls.
- (o) Inpatient intensive rehabilitation hospital services, including respiratory rehabilitation services, in a general acute care hospital are covered, subject to utilization controls, when either of the following criteria are met:
- (1) A patient with a permanent disability or severe impairment requires an inpatient intensive rehabilitation hospital program as described in Section 14064 to develop function beyond the limited amount that would occur in the normal course of recovery.
- (2) A patient with a chronic or progressive disease requires an inpatient intensive rehabilitation hospital program as described in Section 14064 to maintain the patient's present functional level as long as possible.
- (p) Adult day health care is covered in accordance with Chapter 8.7 (commencing with Section 14520).
- (q) (1) Application of fluoride, or other appropriate fluoride treatment as defined by the department, other prophylaxis treatment for children 17 years of age and under, are covered.
- (2) All dental hygiene services provided by a registered dental hygienist, a registered dental hygienist in alternative practice, or a registered dental hygienist in extended functions pursuant to Article 9 (commencing with Section 1900) of Chapter 4 of Division 2 of the Business and Professions Code may be covered

SB 1472 — 64 —

as long as they are within the scope of Denti-Cal benefits and they are necessary services provided by a registered dental hygienist, a registered dental hygienist in alternative practice, or a registered dental hygienist in extended functions.

- (r) (1) Paramedic services performed by a city, county, or special district, or pursuant to a contract with a city, county, or special district.
- (2) All providers enrolled under this subdivision shall satisfy all applicable statutory and regulatory requirements for becoming a Medi-Cal provider.
- (3) This subdivision shall be implemented only to the extent funding is available under Section 14106.6.
- (s) In-home medical care services are covered when medically appropriate and subject to utilization controls, for beneficiaries who would otherwise require care for an extended period of time in an acute care hospital at a cost higher than in-home medical care services. The director shall have the authority under this section to contract with organizations qualified to provide in-home medical care services to those persons. These services may be provided to patients placed in shared or congregate living arrangements, if a home setting is not medically appropriate or available to the beneficiary. As used in this section, "in-home medical care service" includes utility bills directly attributable to continuous, 24-hour operation of life-sustaining medical equipment, to the extent that federal financial participation is available.

As used in this subdivision, in-home medical care services, include, but are not limited to:

- (1) Level of care and cost of care evaluations.
- (2) Expenses, directly attributable to home care activities, for materials.
  - (3) Physician fees for home visits.
- (4) Expenses directly attributable to home care activities for shelter and modification to shelter.
- (5) Expenses directly attributable to additional costs of special diets, including tube feeding.
- 37 (6) Medically related personal services.
- 38 (7) Home nursing education.
- 39 (8) Emergency maintenance repair.

-65 - SB 1472

(9) Home health agency personnel benefits which permit coverage of care during periods when regular personnel are on vacation or using sick leave.

- (10) All services needed to maintain antiseptic conditions at stoma or shunt sites on the body.
  - (11) Emergency and nonemergency medical transportation.
  - (12) Medical supplies.

- (13) Medical equipment, including, but not limited to, scales, gurneys, and equipment racks suitable for paralyzed patients.
- (14) Utility use directly attributable to the requirements of home care activities which are in addition to normal utility use.
  - (15) Special drugs and medications.
- (16) Home health agency supervision of visiting staff which is medically necessary, but not included in the home health agency rate.
  - (17) Therapy services.
- (18) Household appliances and household utensil costs directly attributable to home care activities.
  - (19) Modification of medical equipment for home use.
- (20) Training and orientation for use of life support systems, including, but not limited to, support of respiratory functions.
- (21) Respiratory care practitioner services as defined in Sections 3702 and 3703 of the Business and Professions Code, subject to prescription by a physician and surgeon.

Beneficiaries receiving in-home medical care services are entitled to the full range of services within the Medi-Cal scope of benefits as defined by this section, subject to medical necessity and applicable utilization control. Services provided pursuant to this subdivision, which are not otherwise included in the Medi-Cal schedule of benefits, shall be available only to the extent that federal financial participation for these services is available in accordance with a home- and community-based services waiver.

(t) Home- and community-based services approved by the United States Department of Health and Human Services may be covered to the extent that federal financial participation is available for those services under waivers granted in accordance with Section 1396n of Title 42 of the United States Code. The director may seek waivers for any or all home- and community-based services approvable under Section 1396n of

SB 1472 — 66 —

1 Title 42 of the United States Code. Coverage for those services shall be limited by the terms, conditions, and duration of the federal waivers.

(u) Comprehensive perinatal services, as provided through an agreement with a health care provider designated in Section 14134.5 and meeting the standards developed by the department pursuant to Section 14134.5, subject to utilization controls.

The department shall seek any federal waivers necessary to implement the provisions of this subdivision. The provisions for which appropriate federal waivers cannot be obtained shall not be implemented. Provisions for which waivers are obtained or for which waivers are not required shall be implemented notwithstanding any inability to obtain federal waivers for the other provisions. No provision of this subdivision shall be implemented unless matching funds from Subchapter XIX (commencing with Section 1396) of Chapter 7 of Title 42 of the United States Code are available.

- (v) Early and periodic screening, diagnosis, and treatment for any individual under 21 years of age is covered, consistent with the requirements of Subchapter XIX (commencing with Section 1396) of Chapter 7 of Title 42 of the United States Code.
- (w) Hospice service that is Medicare-certified hospice service is covered, subject to utilization controls. Coverage shall be available only to the extent that no additional net program costs are incurred.
- (x) When a claim for treatment provided to a beneficiary includes both services which are authorized and reimbursable under this chapter, and services which are not reimbursable under this chapter, that portion of the claim for the treatment and services authorized and reimbursable under this chapter shall be payable.
- (y) Home- and community-based services approved by the United States Department of Health and Human Services for beneficiaries with a diagnosis of AIDS or ARC, who require intermediate care or a higher level of care.

Services provided pursuant to a waiver obtained from the Secretary of the United States Department of Health and Human Services pursuant to this subdivision, and which are not otherwise included in the Medi-Cal schedule of benefits, shall be available only to the extent that federal financial participation for

**— 67 — SB 1472** 

these services is available in accordance with the waiver, and 2 subject to the terms, conditions, and duration of the waiver. 3 These services shall be provided to individual beneficiaries in 4 accordance with the client's needs as identified in the plan of 5 care, and subject to medical necessity and applicable utilization 6 control.

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The director may under this section contract with organizations qualified to provide, directly or by subcontract, services provided for in this subdivision to eligible beneficiaries. Contracts or agreements entered into pursuant to this division shall not be subject to the Public Contract Code.

- (z) Respiratory care when provided in organized health care systems as defined in Section 3701 of the Business and Professions Code, and as an in-home medical service as outlined in subdivision (s).
- (aa) (1) There is hereby established in the department, a program to provide comprehensive clinical family planning services to any person who has a family income at or below 200 percent of the federal poverty level, as revised annually, and who is eligible to receive these services pursuant to the waiver identified in paragraph (2). This program shall be known as the Family Planning, Access, Care, and Treatment (Family PACT) Waiver Program.
- (2) The department shall seek a waiver for a program to provide comprehensive clinical family planning services as described in paragraph (8). The program shall be operated only in accordance with the waiver and the statutes and regulations in paragraph (4) and subject to the terms, conditions, and duration of the waiver. The services shall be provided under the program only if the waiver is approved by the federal Health Care Financing Administration in accordance with Section 1396n of Title 42 of the United States Code and only to the extent that federal financial participation is available for the services.
- (3) Solely for the purposes of the waiver and notwithstanding any other provision of law, the collection and use of an individual's social security number shall be necessary only to the extent required by federal law.
- (4) Sections 14105.3 to 14105.39, inclusive, 14107.11, 24005, and 24013, and any regulations adopted under these statutes shall apply to the program provided for under this subdivision. No

SB 1472 — 68 —

other provision of law under the Medi-Cal program or the State-Only Family Planning Program shall apply to the program provided for under this subdivision.

- (5) Notwithstanding Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code, the department may implement, without taking regulatory action, the provisions of the waiver after its approval by the federal Health Care Financing Administration and the provisions of this section by means of an all-county letter or similar instruction to providers. Thereafter, the department shall adopt regulations to implement this section and the approved waiver in accordance with the requirements of Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code. Beginning six months after the effective date of the act adding this subdivision, the department shall provide a status report to the Legislature on a semiannual basis until regulations have been adopted.
- (6) In the event that the Department of Finance determines that the program operated under the authority of the waiver described in paragraph (2) is no longer cost effective, this subdivision shall become inoperative on the first day of the first month following the issuance of a 30-day notification of that determination in writing by the Department of Finance to the chairperson in each house that considers appropriations, the chairpersons of the committees, and the appropriate subcommittees in each house that considers the State Budget, and the Chairperson of the Joint Legislative Budget Committee.
- (7) If this subdivision ceases to be operative, all persons who have received or are eligible to receive comprehensive clinical family planning services pursuant to the waiver described in paragraph (2) shall receive family planning services under the Medi-Cal program pursuant to subdivision (n) if they are otherwise eligible for Medi-Cal with no share of cost, or shall receive comprehensive clinical family planning services under the program established in Division 24 (commencing with Section 24000) either if they are eligible for Medi-Cal with a share of cost or if they are otherwise eligible under Section 24003.
- 39 (8) For purposes of this subdivision, "comprehensive clinical 40 family planning services" means the process of establishing

-69 - SB 1472

objectives for the number and spacing of children, and selecting 1 2 the means by which those objectives may be achieved. These 3 means include a broad range of acceptable and effective methods 4 and services to limit or enhance fertility, including contraceptive 5 methods, federal Food and Drug Administration approved contraceptive drugs, devices, and supplies, natural family 6 7 planning, abstinence methods, and basic, limited fertility 8 management. Comprehensive clinical family planning services include, but are not limited to, preconception counseling, maternal and fetal health counseling, general reproductive health 10 care, including diagnosis and treatment of infections and 11 12 conditions, including cancer, that threaten reproductive 13 capability, medical family planning treatment and procedures, including supplies and followup, and informational, counseling, 14 and educational services. Comprehensive clinical family 15 planning services shall not include abortion, pregnancy testing 16 17 solely for the purposes of referral for abortion or services 18 ancillary to abortions, or pregnancy care that is not incident to 19 the diagnosis of pregnancy. Comprehensive clinical family 20 planning services shall be subject to utilization control and 21 include all of the following: 22

- (A) Family planning related services and male and female sterilization. Family planning services for men and women shall include emergency services and services for complications directly related to the contraceptive method, federal Food and Drug Administration approved contraceptive drugs, devices, and supplies, and followup, consultation, and referral services, as indicated, which may require treatment authorization requests.
- (B) All United States Department of Agriculture, federal Food and Drug Administration approved contraceptive drugs, devices, and supplies that are in keeping with current standards of practice and from which the individual may choose.
- (C) Culturally and linguistically appropriate health education and counseling services, including informed consent, that include all of the following:
  - (i) Psychosocial and medical aspects of contraception.
- 37 (ii) Sexuality.

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- (iii) Fertility.
- 39 (iv) Pregnancy.
- 40 (v) Parenthood.

SB 1472 — 70 —

1 (vi) Infertility.

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- 2 (vii) Reproductive health care.
- 3 (viii) Preconception and nutrition counseling.
  - (ix) Prevention and treatment of sexually transmitted infection.
- 5 (x) Use of contraceptive methods, federal Food and Drug 6 Administration approved contraceptive drugs, devices, and 7 supplies.
  - (xi) Possible contraceptive consequences and followup.
  - (xii) Interpersonal communication and negotiation of relationships to assist individuals and couples in effective contraceptive method use and planning families.
  - (D) A comprehensive health history, updated at next periodic visit (between 11 and 24 months after initial examination) that includes a complete obstetrical history, gynecological history, contraceptive history, personal medical history, health risk factors, and family health history, including genetic or hereditary conditions.
  - (E) A complete physical examination on initial and subsequent periodic visits.
  - (ab) Purchase of prescribed enteral formulae is covered, subject to the Medi-Cal list of enteral formulae and utilization controls.
  - (ac) Diabetic testing supplies are covered when provided by a pharmacy, subject to utilization controls.
  - SEC. 35. No reimbursement is required by this act pursuant to Section 6 of Article XIII B of the California Constitution because the only costs that may be incurred by a local agency or
- 28 school district will be incurred because this act creates a new
- 29 crime or infraction, eliminates a crime or infraction, or changes
- 30 the penalty for a crime or infraction, within the meaning of
- 31 Section 17556 of the Government Code, or changes the
- 32 definition of a crime within the meaning of Section 6 of Article
- 33 XIIIB of the California Constitution.